

**FY 2003  
State Plan  
for  
Title I  
and  
Title VI, Part B**

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**Michigan Department of Career Development  
201 N. Washington Square  
Lansing, Michigan 48913  
<http://www.Michigan.gov/mdcd>**

*Effective Date: July 1, 2002*

**STATE PLAN FOR THE STATE VOCATIONAL REHABILITATION SERVICES PROGRAM  
AND  
STATE PLAN SUPPLEMENT FOR THE STATE SUPPORTED EMPLOYMENT SERVICES  
PROGRAM**

**STATE:** **MICHIGAN**

**AGENCY:** **MICHIGAN DEPARTMENT OF CAREER DEVELOPMENT**

**AGENCY TYPE:** **GENERAL** **X** **BLIND**        **COMBINED**

**SECTION 1: LEGAL BASIS AND STATE CERTIFICATIONS**

- 1.1** The Michigan Department of Career Development (name of designated State agency or designated State unit) is authorized to submit this State plan under title I of the Rehabilitation Act of 1973, as amended<sup>1</sup> and its supplement under title VI, part B of the Act.<sup>2</sup>
- 1.2** As a condition for the receipt of Federal funds under title I, part B of the Act for the provision of vocational rehabilitation services, the Michigan Department of Career Development-Rehabilitation Services (name of the designated State agency)<sup>3</sup> agrees to operate and administer the State Vocational Rehabilitation Services Program in accordance with the provisions of this State plan<sup>4</sup>, the Act, and all applicable regulations<sup>5</sup>, policies, and procedures established by the Secretary. Funds made available under section 111 of the Act are used solely for the provision of vocational rehabilitation services under title I and the administration of this State plan.
- 1.3** As a condition for the receipt of Federal funds under title VI, part B of the Act for supported employment services, the designated State agency agrees to operate and administer the State Supported Employment Services Program in accordance with the provisions of the supplement to this State plan<sup>6</sup>, the Act, and all applicable regulations<sup>7</sup>, policies, and procedures established by the Secretary. Funds made available under title VI, part B are used solely for the provision of supported employment services and the administration of the supplement to the title I State plan.
- 1.4** The designated State agency and/or the designated State unit has the authority under State law to perform the functions of the State regarding this State plan and its supplement.
- 1.5** The State legally may carry out each provision of the State plan and its supplement.
- 1.6** All provisions of the State plan and its supplement are consistent with State law.
- 1.7** The Treasurer, State of Michigan (title of State officer) has the authority under State law to receive, hold, and disburse Federal funds made available under this State plan and its supplement.
- 1.8** The Director (title of State officer) has the authority to submit this State plan for vocational rehabilitation services and the State plan supplement for supported employment services.
- 1.9** The agency that submits this State plan and its supplement has adopted or otherwise formally approved the plan and its supplement.

**EFFECTIVE DATE: July 1, 2002**

**1.10** The effective date of this State plan and its supplement is July 1, 2002.

\_\_\_\_\_  
**(Signature)**

Barbara Bolin, Ph.D.  
**(Typed Name of Signatory)**

\_\_\_\_\_  
**(Date)**

Director  
**(Title)**

- <sup>1</sup> Public Law 93-112, as amended by Public Laws 93-516, 95-602, 98-221, 99-506, 100-630, 102-569, 103-073, and 105-220.
- <sup>2</sup> Unless otherwise stated, "Act" means the Rehabilitation Act of 1973, as amended.
- <sup>3</sup> All references in this plan to "designated State agency" or to "the State agency" relate to the agency identified in this paragraph.
- <sup>4</sup> No funds under title I of the Act may be awarded without an approved State plan in accordance with section 101(a) of the Act and 34 CFR part 361.
- <sup>5</sup> Applicable regulations include the Education Department General Administrative Regulations (EDGAR) in 34 CFR parts 74, 76, 77, 79, 80, 81, 82, 85, and 86 and the State Vocational Rehabilitation Services Program regulations in 34 CFR part 361.
- <sup>6</sup> No funds under title VI, part B of the Act may be awarded without an approved supplement to the title I State plan in accordance with section 625(a) of the Act.
- <sup>7</sup> Applicable regulations include the EDGAR citations in footnote 5, 34 CFR part 361, and 34 CFR part 363.

**EFFECTIVE DATE: July 1, 2002**

**TITLE I****CERTIFICATIONS REGARDING LOBBYING, DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 34 CFR Part 82, [New Restrictions on Lobbying,] and 34 CFR Part 85, [Government-wide Department and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants).] The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Education determines to award the covered transaction, grant, or cooperative agreement.

**1. LOBBYING**

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 34 CFR part 82, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 34 CFR Part 82, Section 82.105 and 82.110, the applicant certifies that:

- (a) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement;
- (b) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, [Disclosure Form to Report Lobbying,] in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

**2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 34 CFR Part 85, for prospective participants in primary covered transactions, as defined at 34 CFR Part 85, Sections 85.105 and 85.110 -A. The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statute; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any

of the offenses enumerated in paragraph (1)(b) of this certification; and

- (d) Have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default; and
- B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

**3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 34 CFR Part 85, Subpart F, for grantees, as defined at 34 CFR Part 85, Sections 85.605 and 85.610

-A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an on-going drug-free awareness program to inform employees about
  - (1) The dangers of drug abuse in the workplace;
  - (2) The grantee's policy of maintaining a drug-free workplace;
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
  - (1) Abide by the terms of the statement; and
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position, title, to: Director, Grants and Contracts Services, U.S. Department of Education, 400 Maryland Avenue, S.W. (Room 3124, GSA Regional Office Building No. 3), Washington, DC 20202-4571. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted
  - (2), with respect to any employee who is so convicted

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;

(g) making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (street address, city, county, state, zip code)

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**DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 34 CFR Part 85, Subpart F, for grantees, as defined at 34 CFR Part 85, Sections 85.605 and 85.610 ☐

A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and

B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to: Director, Grants and Contracts Services, U.S. Department of education, 400 Maryland Avenue, S.W. (Room 3124, GSA Regional Office Building No. 3), Washington, DC 20202-4571. Notice shall include the identification number(s) of each affected grant.

Check ☐ if there are workplaces on file that are not identified here.

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As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

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NAME OF APPLICANT	PR/AWARD NUMBER AND/OR PROJECT NAME
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Michigan Department of Career Development - Rehabilitation Services	Title I
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PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE
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Barbara Bolin, Ph.D., Director
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SIGNATURE
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DATE
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## TITLE VI, PART B.

## CERTIFICATIONS REGARDING LOBBYING, DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

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A. The applicant certifies that it and its principals:

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- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statute; or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

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- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will [
- (1) Abide by the terms of the statement; and
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- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with

the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;

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B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

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As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

NAME OF APPLICANT

PR/AWARD NUMBER AND/OR PROJECT NAME

Michigan Department of Career Development - Rehabilitation Services Title VI, Part B

PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Barbara Bolin, Ph.D., Director

SIGNATURE

DATE

EFFECTIVE DATE: July 1, 2002

Name of Agency: Michigan Department of Career Development-  
Rehabilitation Services

**Relationship Between the Strategic Goals of the Michigan  
Department of Career Development (MDCD) and the Operational  
Objectives of Michigan Rehabilitation Services (MRS)**

The designated state agency is the Michigan Department of Career Development. The mission of the department is to continuously improve a system that produces a workforce with the required skills to maintain and enhance the state's economy. Its responsibilities encompass the workforce development system, the employment service, the welfare to work program, career and technical education, adult education, and several other entities as identified in the Workforce Investment Act. The designated state unit is Michigan Rehabilitation Services. The relationship between the between the strategic goals and objectives of the MDCD for FY 2002-05 and the operational goals of MRS for FY 2003 are as follows:

MDCD Goal 1: Enhance and sustain an integrated career development system through employer and education partnerships at the state, regional, and local levels.

MDCD Goal 1 - Objective 1 -- MRS OPERATIONAL PLAN GOAL 1  
Provide assistance to workforce development boards (WDBs) and educational organizations to conduct and improve unified strategic planning in each of the 25 local regions.

MRS Operational Objectives

1.1:a Maintain MRS staff representation on all 25 WDBs providing strategic planning input and serving as a resource regarding disability issues.

1.1:b Maintain a partnership with the Michigan Works Association's Department of Labor-funded grant project designed to further increase the knowledge and skills of staff working in the one stop system regarding the needs of citizens with disabilities.

MRS Strategies

1.1:a MRS district managers will assure appropriate MRS leadership on all 25 Workforce Development Boards. MRS managers will attend regular board meetings and participate in committees as necessary for appropriate local strategic planning. Each manager will act as a member of the local workforce board. MRS will assure that persons with



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Rehabilitation Services

disabilities are systemically involved in the environmental scanning processes utilized by the WDBs and partners in their strategic planning process. Each district manager will include in his/her district business plan which management team member serves on each local workforce Board. Resource: Up to five percent of 25 MRS' managers' time and involvement will be given to this activity.

1.1:b MRS senior managers, in partnership with the MRS district managers and the Michigan Works Association (MWA), will assure a systemic approach to continue to promote inclusion of citizens with disabilities in the one stop system as the MWA/Department of Labor grant-funded project draws to a conclusion. The Workforce Investment Act disability initiative workgroup will recommend a plan for integration of services for people with disabilities offered through the 25 workforce development boards. Performance reviews of MRS managers assigned will include feedback on progress in local strategic planning regarding implementation and alignment of programming for people with disabilities offered through collaboration with Michigan Works! Resource: Two deputy field division directors with local district manager involvement as needed.

MDCD Goal 2: Enhance and sustain an effective, integrated career decision-making, career preparation, and job-matching system for youth and adults.

MDCD Goal 2 - Objective 1 - MRS OPERATIONAL PLAN GOAL 2  
Increase the percentage of school districts that participate in Career Pathways and the percentage of students with Educational Development Plans (EDP) that indicate how they will prepare for their careers.

MRS Operational Objectives

2.1:a MRS will increase its youth caseload from 27 percent to 29 percent.

2.1:b MRS counselors will ensure that all in-school youth determined eligible for MRS services have an Educational Development Plan (EDP).

MRS Strategies

2.1:a The Transition Services Team, with assistance from local field service staff, will assure that by the end of the fiscal year, at least 29% of the MRS caseload will

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Rehabilitation Services

be youth. Through local district managers, MRS will complete cash and certified expenditure agreements with local school systems. The match ratio will be 27% local to 73% federal for integration of services for youth with disabilities.

2.1:b Youth determined eligible for MRS services will receive career guidance from MRS staff in aligning their Educational Development Plan with an Individualized Plan for Employment. By the end of the fiscal year, MRS will conduct case service reviews of randomly selected youth cases to assess for collaboration with school personnel, the provision of counseling and guidance, and alignment of EDPs with IEPs and IPEs. Both eastern and western field services divisions will commit counseling staff and provide oversight to ensure operational integrity with goal attainment.

MDCD Goal 2 - Objective 3 - MRS OPERATIONAL PLAN GOAL 3  
Provide services and incentives to encourage more intensive, computer-assisted, accelerated learning.

MRS Operational Objectives

2.3:a MRS will offer the A+ computer certification training programs through MCTI in a distance-learning format at the Plainwell, Lansing, Owosso, and Detroit sites.

2.3:b MRS will offer accelerated reading learning programs (Project Advance) through MCTI for customers with disabilities thereby improving access to higher-level training and job opportunities.

MRS Strategies

2.3:a By the end of the fiscal year, the MCTI trade instructor and the executive director of the Pine Lake Fund A+ certification programs will increase the retention rate of students in these programs by 5% over the current retention rate of 50 percent.

2.3:b By the end of the fiscal year, the MCTI principal and reading instructor will increase the reading program sites by two in areas of the state other than southwest Michigan. Students participating in this program will increase their reading level by at least two grade levels.

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Rehabilitation Services

An allocation of \$601,052.41 in tobacco funds from MDCCD to  
MCTI is anticipated

MDCCD Goal 2 - Objective 5 - MRS OPERATIONAL GOAL 4  
Increase the usage of Michigan's web-based labor exchange  
system.

MRS Operational Objective

2.5:a Local employers and people with disabilities will  
have access to Michigan's web-based labor exchange system  
at each MRS service location.

2.5:b All MRS direct service delivery staff will be  
knowledgeable in the effective use of the labor exchange  
system.

MRS Strategies

2.5:a Computers with Internet access will be available  
through the MRS operations budget in each service location  
with "walk-up self service" and mediated staff assistance  
available. Existing computers and Internet service accounts  
will be used.

2.5:b Two hundred forty professional MRS rehabilitation  
counselors will assist employers and people with  
disabilities in the effective use of the web based labor  
exchange. MRS will maintain the interagency agreement with  
the employment service agency that provides funding for 34  
direct service interviewers for client assistance in job  
matching, placement, and follow up. Sixteen professional  
rehabilitation counselors will be assigned as business  
service representatives. The business service  
representatives will provide direct employer services in  
acquisition and retention, including dissemination of  
information on the web-based labor exchange.

MDCCD Goal 3: Develop an industry-led credentialing and quality  
management system to provide employers with a  
steady supply of well-prepared workers.

MDCCD Goal 3 - Objective 3 - MRS OPERATIONAL PLAN GOAL 5 Increase  
the use of "Work Keys" by employers and educational agencies.

MRS Operational Objective

3.3:a MDCCD-RS vocational rehabilitation counselors,  
rehabilitation services assistants, direct services

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Rehabilitation Services

interviewers, and qualified contract and blended staff will utilize the Work Keys system as appropriate with customers with disabilities and local employers.

MRS Strategy

3.3:a Four MRS staff will be trained as Work Keys profilers. By the end of the fiscal year, each MRS service center will have vocational rehabilitation counselors and/or direct services interviewers available to advise local employers and job seekers with disabilities on the value and use of Work Keys. Two hundred fifty counselors and 34 interviewers will be deployed statewide with at least one per service center available on an itinerant basis.

MDCD Goal 3 - Objective 4 -- MRS OPERATIONAL PLAN GOAL 6  
Help educational institutions align training curricula with emerging employer requirements resulting from new markets and technologies.

MRS Operational Objective

3.4:a MRS will continue to annually evaluate and align MCTI's training curricula with the assistance of their business advisory councils and labor market information.

3.4:b MRS will develop and offer a new training program at MCTI customized to emerging employer requirements.

MRS Strategies

3.4:a The MCTI director, in partnership with the 13 business advisory councils and the trade instructors, will assure that all training curriculum is representative of employer career-entry requirements. Funding is limited as employers volunteer their time. Space for meetings is provided at MCTI. Up to five percent of trade instructors' and the MCTI principal's time will be dedicated to this activity.

3.4:b By the end of the fiscal year, MCTI will offer a new training program customized to an emerging employer with an 85% enrollment rate and 83% placement rate. Funding in the amount of \$80,000 will be allocated from the MCTI budget.

Name of Agency: Michigan Department of Career Development-  
Rehabilitation Services

MDCD Goal 5: Become a high-performance agency through the  
integration of Baldrige Quality criteria into  
internal and external operations.

MDCD Goal 5 - Objective 1 - MRS OPERATIONAL PLAN GOAL 7  
Implement a performance management system that aligns individual  
development plans (IDPs) with the department's strategic plan,  
goals, and objectives.

MRS Operational Objective

5.1:a MRS senior managers will assure the completion of  
all staff IDPs in a timely fashion.

MRS Strategy

5.1:a Staff IDPs will be completed by the end of the  
fiscal year.

MDCD Goal 5 - Objective 2 - MRS OPERATIONAL PLAN GOAL 8  
Implement with educational and workforce development partners a  
formal process to assess the results of the career development  
system and improve productivity, customer service, and employee  
satisfaction.

MRS Operational Objective

5.2:a A sampling of customers will complete  
satisfaction surveys.

5.2:b Employee satisfaction with all agency-sponsored  
staff development activities will be documented after each  
activity is completed.

5.2:c MRS service delivery data will show incremental  
improvement in serving minorities with disabilities.

5.2:d MRS will meet or exceed the performance  
indicators established by the Rehabilitation Services  
Administration.

5.2:e To assess the capacity needs for MRS services for  
new clients entering the rehabilitation system, each field  
office will develop a local operational plan that projects  
the expected performance outcomes in their local community.

5.2:f MRS will ensure alignment of its efforts to  
improve quality with MDCD established system-wide measures.

Name of Agency: Michigan Department of Career Development-  
Rehabilitation Services

MRS Strategies

5.2:a By the end of the fiscal year the MRS program evaluation staff will have completed the customer satisfaction surveys and will have a response rate of at least 25%.

5.2:b All staff attending MRS-sponsored staff development activities will rate the learning experience at benchmark of above 3.5 in satisfaction on a scale of 1-5 with 5 being the highest rating available. Staff will rate the relevancy of staff development activities on its effect on customer service and its alignment with their IDP using the same benchmarks listed above. Program evaluation and staff development staff will review the evaluations for opportunities for improvement.

5.2:c MRS service delivery data will show incremental improvement in serving minorities with disabilities in direct proportion to prevalence of disability among minority populations. Innovation and expansion grants which focus on improved service outcomes for minorities submitted to MRS for funding will receive additional priority in ranking.

5.2:d MRS service delivery data will be monitored by program evaluation staff (1 FTE evaluator) and MRS senior managers on a quarterly basis to determine opportunities for improvement and to assign the development of action plans to ensure that the performance standards are met. MRS will fund a three-year grant that contracts out elements of the program evaluation process to assist in accomplishing this objective.

5.2:e Field-initiated operational plans will be completed and will include expected outcomes regarding total number of new clients to be served, closure rates, appropriate time in the system, and opportunities to make informed choices. Local district business plans will be developed by district managers in April 2002, identifying local strategies for improvement of service delivery consistent with MDCD's strategic plan. Two MRS field division directors and deputy directors will monitor the progress of field business and operational plans, requiring action plans for areas indicating opportunities for improvement.

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5.2:f The program evaluator will coordinate MRS efforts to improve the quality of service delivery using accountability and performance measures with the director of Postsecondary Services on a quarterly basis to ensure alignment with MD CD's established system-wide measures.

MD CD Goal 5 - Objective 4 - MRS OPERATIONAL PLAN GOAL 9  
Improve professional skills of state and local service providers.

MRS Operational Objectives

5.4:a MRS will ensure new service delivery staff are appropriately credentialed and that staff meet the national standard of "qualified rehabilitation counselor" (minimum of a master's degree in appropriate curriculum).

5.4:b MRS will maintain and expand the E-Learn system, the on-line staff development system. By September 30, 2005, the E-Learn system will average 250 hits per month and also will have established 100% of the system's links to other resources.

MRS Strategies

5.4:a By the end of the fiscal year, 87% of the MRS counseling staff will have attained the national standard of a "qualified rehabilitation counselor" which indicates substantial progress is being made to attain the September 30, 2005, compliance goal of 100% of the counselors meeting the national standard. MRS will provide graduate tuition monies through two grant-funded projects to assure that staff are receiving needed staff development training options and achieving the national standards of a "qualified rehabilitation counselor."

5.4:b MRS E-Learn Know-It Center and Online Learning Center will increasingly be utilized to support the professional development of staff. E-Learn casework resources, events learning site, reference center, water cooler, leadership and personal growth programs will be continued and expanded. Funds will be allocated from Rehabilitation Services Administration grants and MRS's training budget.

MD CD Goal 5 - Objective 5 - MRS OPERATIONAL PLAN GOAL 10  
Inform MD CD employees and partners about directions, initiatives, and services.

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MRS Operational Objective

5.5:a MRS will utilize InfoShare, CareerWise, and/or the QUEST planning video to educate staff and MRS partners regarding the MDCD strategic directions.

MRS Strategy

5.5:a All MRS staff will have viewed the QUEST video on strategic directions. MRS will continue to assign two staff to the Quality Assurance Team and one staff person to the editorial advisory committee for CareerWise. The MDCD Strategic Plan will be forwarded to all district managers to be reviewed in local staff meetings to ensure all agency staff are informed of and utilizing the department's goals and objectives as their primary reference point for completion of local operational plans. MRS staff will receive written instruction to regularly review InfoShare for updates. CareerWise publications will be forwarded to local offices for distribution in customer waiting areas and review by all local staff. Field staff will regularly be encouraged to submit "best practice" information and examples of customer feedback letters for use in CareerWise publication.



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**Attachment 4.2:** State independent commission or state  
rehabilitation council

Summary of Input Provided by the State Rehabilitation Council

The accomplishments for the Michigan Rehabilitation Council  
(MRC) during FY 2001 include:

1. Four meetings, including a strategic planning retreat, were held throughout the state.
2. Collaborate with the state agency on the annual update to the general services VR State Plan.
3. Sponsored three employment focus groups in an effort to determine the needs of persons in the communities of Saginaw, Escanaba, and Detroit.
4. Continued the expansion of partnership efforts, including participation in the SILC retreat, Michigan Commission on Disability Concerns Youth Leadership Forum, Michigan Works! Association Labor Grant steering committee, Client Assistant Program, independent living grant review process, and Disability Voice.
5. Partnered with the state agency at various levels of the organization to include the state director, senior manager meetings, the Equity Work Group, and the strategic work groups of Business Services, Youth Services, and Services to Minority Populations. The MRC also partnered with the hearings manager/ombudsperson, field staff, policy work groups, the E-Learn Community Project and the needs assessment group. These partnership efforts totaled 1200 hours.
6. Relocated the MRC business office outside of the state of Michigan system.
7. Negotiated the personnel grant to the fiduciary agent i.e. MDRC, to be expanded to include operation expenditures for a total fiscal year 2002 grant of \$250,757.00.
8. Worked with the governor's appointment specialist to achieve the appointment of 13 new members.

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9. Determined a FY 2002 Business Plan with a goal of achieving 501(c)(3) status.

MEMBERSHIP

The MRC continued to conduct business with an average 55% vacancy rate in membership until August 2001, when the thirteen vacancies were filled by Governor appointment. Though the membership surpasses a majority of members with varied disability characteristics, it is deficit in ethnic diversity as well as representation from the geographic area of the northern lower peninsula of our state. As well, the mandated representation by the state department providing special education services is vacant. It is hoped that this ex-officio position will be filled during the upcoming year. Even so, the Council is pleased to be at full voting member capacity for the first time in two and a half years.

ORGANIZATION

A strategic planning retreat meeting was held in December 2000. Utilizing the 1998 Amendments to the Rehabilitation Act as a guide, the following actions resulted: an update to the MRC's mission and vision; and the creation of a strategic plan (to be reviewed on an annual basis). Specifically, they include:

MISSION: To improve vocational rehabilitation services in Michigan.

VISION: Vocational rehabilitation services will be provided in a manner that is respectful, equitable, and effective in achieving meaningful employment outcomes for people with disabilities.

GOAL 1: To increase the number of satisfied VR consumers.

GOAL 2: To become an effective voice for consumers for VR services.

GOAL 3: To establish and maintain effective partnerships and collaborations with other related organizations to improve VR services.

In addition to the retreat, meetings were held in Saginaw, Hannahville, and Detroit. As usual, public comment was scheduled during the agenda, with outreach and an invitation to local community partners, the news media, and service providers.

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The MRC committee structure includes executive; state plan; council analysis, review and development; service delivery effectiveness; and partners and resources. It is anticipated that with a membership now at full capacity, the expertise of the seasoned members combined with the enthusiasm of the recently appointed members will drive the success of the Strategic Plan goals at the committee level.

At the last meeting of FY 2001, the Council approved a business plan created to support the Strategic Plan. The goals from this plan include:

- FY 2002 Business Goal: Establish the MRC as a 501(c)(3) organization.
- FY 2002 Strategic Goal: Assure successful career outcomes for the citizens of Michigan with disabilities through productive systems advocacy within the state vocational rehabilitation agency, while engaging in effective partner relationships.
- Objectives:
- 1 - Redesign the business meeting function,
  - 2 - Redesign the employment focus group function, and
  - 3 - Redesign staff capacity.

#### CONSUMER INPUT

During fiscal year 2001, the MRC facilitated three employment focus groups (EFGs), each scheduled to take place the day prior to a quarterly meeting. The purpose was to determine the needs of people with disabilities in a specific community as they worked to fulfill their career goals. Each venue represented a distinct geographic population. The groups took place in Saginaw, Escanaba and Detroit. In each community, EFG flyer announcements were distributed to a full spectrum of community partners. Also, for each location, the MRS program evaluator provided the MRC with a random sample of former, current, and closed (both successful and not successful) cases. These individuals received the EFG flyer along with a career development survey to complete, in the event they were unable to attend the meeting.

The format of the EFGs was to gather information in a large group setting utilizing the questions contained within the career development survey as stimulus. Though each EFG had small participant response, the MRC found that in combination with the

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returned surveys, useful anecdotal information was revealed. The MRC will use this data and the resulting themes in future planning efforts, as well as in dialogue with MRS.

Utilizing the survey format, the following is the summary of responses, along with a condensed version of the comments.

1. What is your current employment status? (Check as many that apply)

	Number
IN SCHOOL	37
CURRENTLY EMPLOYED	49
LOOKING FOR A JOB	45
LOOKING FOR A CHANGE IN JOBS	16
OTHER	14

Comments:

"Would like to do assembly work;" "Housing;" "I'm on disability and not yet working. I'm afraid to work full-time. I've been fired a lot." "Unemployed at this time due to physical reasons;" "Going GED at WC3;" "I'm a food service worker;" "I want to attend tax school Sept. 10, 2001;" "Better education to make me more employable;" "Awaiting a favorable decision from SSD;" "Just starting (school) at WCCCD;" "Work one day/wk at Trico;" "Family illness;" "Working whenever [sic] they need about 3 times a week 4 hours;" "In therapy;" Job Training through TMI class - in our community (Crystal Falls);" "My job is really hard on my back;" "Office-Business-Part time or possibly Medicare;" "I would like more hours, or an additional part time job." "I need health benefits."

2. When you were in the public/private school system, what assistance did you receive in creating a plan to achieve your career development Goals? (Check as many that apply)

	Number
WORK WITH GUIDANCE COUNSELOR	33
INDIVIDUALIZED EDUCATIONAL PLANNING COMMITTEE	16
SELF-MOTIVATED	44
TRANSITION SERVICES	10
VOCATIONAL APTITUDE TESTS	15
OTHER	11

Comments: "Financial assistance;" "Starr Commonwealth;" "Grants for school;" "School craft college;" "I got zero help from Detroit Public Schools;" "Training at Visual Technology - SDRC;"

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"Transportation;" "Went to Doctors who specialized in testing for learning and other disabilities;" "In college I did receive help from a counselor;" "Handicap services at Wayne State University;" "Support from wonderful parents;" "Job service at NMU;" "I decided very young that I wanted to go to college. My family placed a high emphasis on education;" "Because desire to leave school was before 26, school gave little to no support;" "My counselor gave me many good career suggestions!"

3. Are there employment opportunities in your community?

Response: 53 YES      23 NO

Describe the opportunities that exist: "Schools, apartment buildings, etc." "I am a social worker and the want ads page for social workers is miles long. I worked in community planning at United Way for over a year and am now returning to school." "I don't know;" "Starr Commonwealth;" "Computer programming, network administration w/5+ years experience." "MRS sent me to Medical Billing, eight Continuing education credits. MRS paid for the class, reimbursed books [sic], charges, and gave me gasoline weekly allowance... Now I am trying to get on the job training by volunteering." "Medical Assistant;" "Culinary Arts;" "Customer Service, Management;" "I don't know." "Detroit's Work Place;" "Factory [sic] work;" "I guess there are some employment opportunities in my community but I am not looking at this current time." "Medical, Clerical, Labor, Banking, Security;" "Casinos, Clubs, Restaurants;" "Many, physical labor - clerking, others;" "Restaurants;" "There's work, but not for me." "Rite Aid & Blockbuster;" "Kroger & Burger King;" "The employment opportunities in this neighborhood are only good if you're a teenager or want a second job. The pay is only between \$5.00 & \$6.50 and there are no benefits." "With the right education opportunities exist;" "Very few for those with more capability, especially in the area of Languages;" "Grocery stores, nursing homes, banks;" "Very limited;" "None;" "Many opportunities in education if you are qualified. You need a college degree or vocational training for nearly all good benefit, paying jobs." "I suppose it depends on what area of employment. As far as people generally looking for work there are jobs like fast food. Soo locks tourism, gas stations, hotels/motels, war memorial hospital jobs, tribal employment, janitorial, etc." "Some jobs are more prevalent than others, like factory and grocery stores. Need more office jobs." "Very little opportunity - many people looking for work -very few jobs. I have applied over & over again & have never been hired." "Business, service, school;"

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"NTI works to help place people on jobs they can do;" "Mining;"  
"Logging;" and "Not quite sure what they may be at this time."

4. Have you faced barriers when looking for employment?

Response: 54 YES 26 NO

Describe the barriers faced: "Don't know how to fill-out application;" "Lack of Referral;" "Lack appropriate attire for interview;" "Pre-existing health conditions are negatives to possible employers." "Lack money for appropriate attire for job interviews;" "Rudeness experienced at local MRS office;" "Lack of accommodations;" "Public transportation is nonexistent in large areas. Even when existent in a city, it is unavailable in the county." "Great, 24-hour transportation service in Bay County;" "You have to go across 8 miles to find a job;" "Employer discrimination, resources, attitude of co-workers, personal computer and computer technology;" "Transportation;" "Personal assistants;" "Age discrimination, gender discrimination, lack of enough computer experience in programming, lack of being able to write in 4 or 5 different computer languages i.e. COBOL, C++, JAVA, Power Builder, and Oracle 8I." "Employment freeze at the St. Mary - Livonia Hospital. No room for me to volunteer at Garden City Hospital." "They are not hiring at the moment." "Completing application, how to interview;" "Employer complained that I was too slow in getting my work completed." "I need interviewing skills." "Attitudes of co-workers." "I don't know how to interview." "Some jobs may require a bachelor degree." "Sometimes credit history (Bank);" "American with Disability [sic] Act, employer discrimination & lawsuit, accommodations;" "Criminal record always comes back to haunt me;" "Incarcerated for 12 ½ yrs." "Employer discrimination and lack of skills. Felonies. Better jobs are out of the city, some (most) are not on the bus lines." "I am already employed, and have not looked for employment in my area." "Lack of time to job seek due to school;" "I faced a problem of being laid off for two jobs without a clear explanation." "My work history has some work space between jobs." "Problems with child care. I do not have professional clothing for job interview or job search." "Walking. Labor skills - upgrade employment skills. P.S. Money for transportation, food, cloths, day care, personal items, soap, deodorant, etc. Resources find for family need [sic]. Transportation, car, or repairs (cost more than 9 good used cars). Better housing for family, meet family basic needs." "I am currently on probation, which will be over once my court cost and restitution is paid, deadline 1-2002. Most employers don't

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want to hire me until it's paid off." "1) Transportation (most of the jobs that I am qualified for are located in the suburbs). 2) Health Insurance." "My illness of having seizures and transportation, lack of skills, assistive technology;" "Flat feet, can't spell;" "Poor spelling, poor reading;" "I'm still in school;" "I have difficulty in taking and passing employment tests due to my LD and related mental/education aptitude." "In a smaller community you really have to prove yourself because otherwise 'it's who you know' that gets a person hired." "I need a job where the environment suits my needs because of my disability;" "I'm now disabled due to a lung disease and on oxygen 24/7. I'm on the list for a single lung transplant as of 5-7-01. Wait is 2½ years. Some employers won't hire someone with my condition on oxygen." "For ten years, I was too sick to work, so there is a large gap in my resume. For the past eight years I have been working part time (6 hrs, per week) at Copper County Mental Health." "Potential employers are afraid to hire a deaf person - like me;" "No health insurance;" "I may be encountering discrimination, or, as my sister points out, the competition is fierce - there are many, many people applying for each job." "Transportation;" "Many of the jobs offered, provide low wages and often no benefits;" "Given the rural nature of the area, there are few employment options, and starting a successful small business is also challenging in the rural setting;" and "Acquiring start-up capital is more difficult for a person with a disability."

5. Is there any information related to your attempts and desires to achieve a satisfying, independent lifestyle that you would like to share?

Response: "There should be more testing in what a person is interested in, what a person's capabilities are, and what that persons [sic] talents are." "Yes. I could use transportation and lunch money throughout summer school. I am a dialysis patient and I go to school year-round because of my condition and I could also use an upgraded computer." "I've wanted to go back to school to take computer and accounting classes but they want English, history, and science as prerequisites instead of just teaching you what you want. It's too costly that way." "I never had much in my life, but I am willing, and determined, to do whatever I can to make my life better, and this is the only way I can make it happened [sic]. Thank You!" "I think that more attention needs to be given to the attitudes of teachers in the Detroit Public School system in regards to how students with hidden disabilities are treated. I was lucky that I had a strong

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will to go on. But what about those who do not! They need more mentors in place who know how it feels at the bottom. I work hard in hopes of becoming one of those teachers." "A job that I'm satisfied with, have the skills for, and easy, close transportation. A job that pays well. Skills to learn to get a good job with my disability." "To be strong no matter what!" "Money management & time management;" "I would like to do something that would keep me occupied and interested. As well as pays well." "I have a desire to start my own business (income tax preparation & financial services) and with the MRS help I hope to achieve that goal." "The barriers are that people with disabilities are looked at differently. If you have to work in some area, public transportation is hard to get. Unless you have a degree jobs are hard to find." "Having a good job, and a car, would help me tremendously. I am currently working on my associates degree in social work technician, expected graduation date is 01-2003." "Yes. Attending P.A.R.S to strengthen and up grade my reading skills." "I am truly eager to learn the concept of driving. Therefore I will be able to transport myself as well as my daughter." "I would just like to say that I need to be aware of all available opportunities for possible temp or permanent work." "I'm physically [sic] challenged [sic]; I have the will, desire to work for an income. I'm aware that dreams come with and can be fulfilled [sic] with employment." "Jan Skinner at Wayne Mich. Rehabilitation and Career Development is very helpful and professional." "I wish to live and work independently. I want a job with career opportunities, benefits, etc." "I would like to get my high school diploma by taking some classes also, in career program." "I want to be the best at it. An [sic] go as far as I [sic] can in counseling [sic]." "I'm bipolar and I need to work at coping with stress - high stress offices. My last hospitalization was December 1999." "I know that without MRS, I would have a harder time keeping the schedule that I love right now at work." "Keep working at it - don't give up. It is possible." "Yes, I would like to get a job as a word processor who works at home making a considerable amount of money (resume and cover letter already made and copied on the Internet) and, I would also like assistance in getting a lavish, spacious apartment." "I would like to go to school for nursing and take care of my daughter." "I appreciate the service I received." "I am willing and eager to re-train to add more skills than just my data entry computer operator experience, but was told I have to find the job before I can have help paying for the training - confusing!" "Start out with a part time volunteer work - for example, for the Red Cross or the hospital. There is less stress, and you can start working right now. You



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can polish your will have a recent recommendation." "I want to find a part-time job to supplement my income of social security. I'm living with a parent right now but would like to find my own place soon & a part-time office position." "Sure - I guess. The help to find/achieve a satisfying independent lifestyle is out there. People need to look for it. There are wonderful people working at MI Works! They have done so much for me, including tips on interviewing. I'm in a world of gratitude to them." "Yea, in 1987 I wanted to go to college because of my health problems. The dean told me not to go because of my poor academic progress in high school. It would be a waste of time. I went anyways and I am a senior at NMU in Social Work." "There is a lack of information of what is available for people with disabilities. People who work at vocational rehabilitation are insensitive to their client's challenges. An independent lifestyle cannot be obtained because there is not accessibility to specialists who work individually with individuals who have specific individual disabilities. (Examples, person who is dyslexia needs a specialist to help them);" "Being in school and having only a part-time job makes it hard to pay the bills."

6. What are some "Hot Topic" issues which have not already been discussed?

RESPONSE: MRS is mandated to provide transition service to teenagers; Centers for independent living can assist people under 18 yrs. of age; People are largely unaware of MRS; Even those in the MRS system are unaware of all the services and options MRS can provide; MRS marketing is lacking; MRS customers face inconsistent receptions; MRS customers do not feel they receive complete information regarding all the services available to them; There seems to be a disparity of MRS services between the three counties; Some MRS clients fail to recognize their responsibilities to follow-through. Not enough living wage employment opportunities; Employers discriminate against hiring people with disabilities; Employers should focus on one's abilities not the disability; The general public harbors a negative perception related to a person with a disability working; People with disabilities are often discouraged from attending college; Everyone needs to raise their own career expectations for people with disabilities.

#### OPERATIONS

The Council membership is supported by two full-time staff - the executive director and the council coordinator. Historically, the MRC was housed within a state of Michigan office building,

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with an operations budget via the Michigan Department of Career Development - Rehabilitation Services. The MRC personnel were supported by a grant awarded to a statewide disability organization, who served as the fiduciary and employer of record. Near the end of the fiscal year, the central administrative offices of MRS were relocated into an office building occupied by the MDCD. As a result of this change, the MRC Chair negotiated the relocation of the Council business office outside of the state system, as well as the combining of its operational and personnel funds into one grant. At the end of the fiscal year, the MRC moved into its new office suite, with the support of an annual budget of \$250,757 (less an 8% fee to the grantee for the handling of accounts payable and personnel).

#### PARTNERSHIPS

Throughout the past year, the MRC has maintained a focus on statewide partnership activities with the SILC, the CAP, the Michigan Works Association Department of Labor Grant Work group, the Michigan Commission on Disability Concerns - Youth Leadership Steering Committee, and the Disability Voice.

The MRC continues to support the expansion of the independent living network in our state through participation with the annual IL grant review process, as well as the SILC retreat. Also, the local center for independent living is included in any outreach effort related to the planning of the quarterly meeting. The Council looks forward to further discussion with the SILC regarding the expansion of partnership activities.

The Disability Voice partnership effort includes the MRC, the SILC, the Michigan Disability Rights Coalition, the Michigan Commission for the Blind, the Michigan Commission on Disability Concerns, the Michigan Developmental Disabilities Council, and representatives from the Michigan Departments of Career Development-Rehabilitation Services, Community Health, and Transportation. Each organization works to include public input into their respective state plans and/or annual reports. This partnership effort results in Town Hall meetings scheduled at various locations around the state. A local community group is responsible for the planning effort with support and assistance from the DV members. The Council views this activity as a great resource of citizen input, as well as an empowering experience for the community members.

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In FY 2001, two Town Hall Meetings were held. The first was in the Oakland/Macomb area and the second was held in Cadillac. Following is the anecdotal employment input gleaned from each Town Hall meeting.

CADILLAC TOWN HALL MEETING FEEDBACK: Small jobs drastically cut SSI; Is this Michigan Works or a farce?! Employment is a problem. Workshop settings need to continue, rather than just community employment. There is a need for job skills training. Model program job mentoring. There are different programs in different places, but there is limited knowledge about them. Employers are unaware of the abilities of people with disabilities. There are difficulties in sensitivity by employers with people who have hidden disabilities. It seems there is greater understanding if the person is in a wheelchair. It is difficult to get appointments outside of work. There is an unawareness of resources, such as Michigan Works. Churches can be a resource. We need to be strong advocates to coordinate supports. There is limited coordination between programs. Initiate local solutions to meet the needs. There is limited coordination among the disability community and limited knowledge of possible options. We need to network. Need more information on benefits and employment disincentives. School/work experiences are helpful. There are limited options with non-readers and physical disabilities also limits options. There are limited employers who are sensitive to the abilities and needs of persons with disabilities. The guardian lives in a different community, so he has a difficult time helping her find a job. The guardian needs to live closer or she needs to live closer to the guardian. Does Goodwill have job coaches? Who helps individuals get employment besides guardians, supervisors, etc.? What about transportation to the job? How do I get there? I want to work at Big Boy and live on my own. My brother doesn't want to work, he feels he needs school in order to learn a skill. The employer also doesn't want him there because of behavior problems. How do we motivate him to work? My favorite job a NOC is pulling rubber. The best part is getting the check and I have good friends. There are some things I wish were different, such as more breaks (I get tired) and that I didn't have to work so long. I would like to have a different job, like working around the building at CMH. NOC piecework rate is not enough to live on. There is no insurance and no benefits. SSI can hamper a person making more money. It takes away your benefits. I have to become low income in order to gain assistance. I would like to work for a farmer milking cows and feeding the calves. We could use an agent to assist people in

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finding jobs and work on issues of the job (i.e. accommodations). Do job coaches have contact after school is finished? What agency would this be through? MRS, what can they do? Who is the person or agency that guides you when you start looking for a job? Who decides who is employable or not? What agency decides this and why? How is the person to cope when their parents or caregivers are gone? Why isn't there a career tech center training program specifically for the physically disabled and mentally disabled? Is there discrimination? We need support groups.

OAKLAND/MACOMB TOWN HALL MEETING FEEDBACK: MRS does not focus on person-centered planning. They push people into jobs. SSI and SSDI are work disincentives. You lose health insurance. Need access to the capitol and access to businesses. Going into business is a viable alternative for employment. Recognize disabled people as a distinct minority. Need to focus on three areas: 1) private sector; 2) public sector; and 3) academic sector. The private sector can mean economic independence. It has started in Michigan and expansion is planned. Need unified voice. Need a voice from other organizations. A parent's concern is that their child will have a living wage. Lack of transition opportunities into the community for individuals with severe and multiple disabilities. Uncover jobs in the community (i.e. enterprise opportunities as self-employment) because there is a lack of jobs in the community. Medication costs are a lot of money. You can lose insurance. Ticket To Work Act is not available in Michigan. It is piloted in other states. It has extended health insurance. Michigan Rehab - the limit on money for educational goals. Where is the employment and what types? Advertisements alone don't help. Transportation (i.e. getting there) is a problem. There is discrimination in the work place. For the non-employed there is discrimination in hiring. I was employed, then my disability occurred. I want to get along as much as I can on my own. But work disappeared after the disability. Would like places to work/volunteer at agencies that work with children with disabilities. Less discrimination for folks with mental illness. Such places as Club Houses, Drop-In Center are employing people who experience mental illness. \* Self-employment is another option. Can pair up with another individual to open up a business. If you can't find a job, make a job. Technology and job accommodations are very important. Need creative assistive technology. \* COBRA is limited, but can be extended. Small businesses do not have the ability (numbers) to offer as much insurance support as larger companies. People need work to keep them busy so that it doesn't lead to

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drugs/alcohol. I need a job! \*Twelve-step support groups are available. How do we agree to get a company to hire as person with a disability? Job creativity is re-thinking what you can do. My frustration and tolerance is low, my son needs an accommodating environment. There are people who speak differently and most people will not take the time to listen. As a result, I was overlooked completely. I was laid off in January and am having a hard time looking for a job. I'm looking for a full-time job, but don't have certain skills for employment. Where do we go for training? Technology is increasing and there are changes in the work force. What I did previously as a job is no longer a job. I'm interested in working with children with disabilities. I want a job where I'm making more than a living wage. How do people go about getting jobs? I went to many agencies but nothing panned out. I also used private agencies, but nothing has worked.

Once again, the MRC affirms the following six MRS focus topics:

1 - Strategic Partnership: As a partner with MRS, the Council is usually included in the planning, policy making, evaluation, and outreach activities as described within the Rehabilitation Act. We anticipate that as this relationship continues to flourish, the true benefit will be realized by the Michigan citizens receiving services from an agency which values continuous improvement as the measure of their service delivery system.

2 - Community Input, Needs, and Satisfaction: MRS has continued to utilize the customer satisfaction survey which was reviewed and affirmed by the Council during the previous fiscal year. The Council is pleased that MRS has created Project Excellence, a grant with the VR Program Evaluation Unit of Michigan State University. This opportunity should serve well the need for expansion of data collection within many of the areas recommended by the MRC to the agency in the past. As well, the findings should provide for further enhancement of the qualitative and quantitative aspects of services. The MRC supports the MRS identified topics including: Disability Management - Analysis of Referrals; MCTI Factors of Success; MCTI labor market needs used in program development; MCTI effectiveness of instructional methods; MRS equitable distribution of case service monies; study of "non-rehabs;" effectiveness of MRS grants awarded to outcomes; caseload size and counselor capacity; manager competencies; post-employment study; using program evaluation studies in decision making; ethnicity data of all services; and business services customer

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satisfaction - consumer and employer. In addition, the MRC recommends the following areas of study: impact of blended staff on the quality of service delivery outcomes; use of orientation and intake; and accuracy of ARMS input.

The MRC has continued involvement in the collaborative efforts of MRS as they facilitate the needs assessment work team. Now that the grant has been awarded, the Council anticipates participation in a number of the activities scheduled to take place (i.e. focus groups and individual surveys). Once again, the MRC challenges the RSA to advocate for the expansion of data collection within the census with regard to disability characteristic. This change would secure base line data for each state and should lead to a reduced expenditure for the comprehensive needs assessment.

We reaffirm two key issues identified in the past and related to the role of the VR Counselor. The MRC has continued to receive input from customers and staff alike regarding the balancing act faced by many field staff as they strive to provide equitable services within the practice of informed choice. Generally speaking, once the consumer connects with their counselor they have had nothing but positive experiences to relate. However, it has become evident that the exercise of informed choice within the customer and counselor partnership is time intensive. As a result, the counselor is faced with the plethora of demands and expectations within their daily work responsibilities and providing quality counseling services. The MRC recommends that this aspect of service delivery be examined in a manner which determines the impact this situation has on empowering customers to make an informed choice.

What was initially planned to be a workgroup with a short-term time frame, the MRS Equity Workgroup (comprised of staff from all levels, a CAP representative and an MRC member) was created to determine the means necessary to achieve statewide equity within the service delivery system. The group intends to present their initial recommendations for review and reaction to the MRC membership and the MRS senior manager staff by mid-winter 2002.

3 - Strategic Focus Issues: On a number of levels, the MRC has continued involvement and offered input with the agency strategic issue workgroups. As these groups work to realize their final recommendations to the administration of the agency by late winter 2002, we anticipate involvement with feedback.

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4 - Human Resources: The MRC acknowledges that the MRS personnel characteristics related to minority and disability populations surpass the demographic percentages for Michigan. Though encouraged by these findings, the Council continues to expect the agency to develop and effect a recruitment strategy directed towards hiring of a greater number of persons with disabilities and of minority heritage within the rehabilitation workforce.

The MRC recognizes the efforts and resources committed by the agency to ensure the comprehensive system of personnel development. In addition, the Council still participates on the steering advisory committee for the CSPD grant.

5 - Service Delivery and Case Management: The Council reemphasizes the practice of informed choice during the entire rehabilitative process. The effective implementation of this practice will evolve as staff internalize this philosophical shift. It is imperative that ongoing training for managers and case-carrying staff is provided, along with a mechanism for discussion of best practices.

The MRC is aware of the ongoing challenges that ARMS poses to its many users. As counselors utilize the system, they experience difficulties in assuming full responsibility for the daily documentation of their casework. This problem is further compounded when the roles and responsibilities of the counselor and rehabilitation assistant have changed, creating a need for clerical support which is now left unmet. As the agency works through these related issues, it is clear to the MRC that the commitment evidenced by the MRS staff is to be applauded for their adaptive abilities.

The agency reports that the majority of their district offices are either totally or partially co-located, with a number of memos of understanding established. The MRC recommends that the agency determine methods from which the effectiveness of the service delivery experience can be monitored, both in quality and quantity. In addition, the MRC Service Delivery Effectiveness Committee anticipates the opportunity to review the ADA compliance plan for each site.

The MRC continues to benefit from its productive relationship with the MRS ombudsperson and hearings manager, who sits on the Council as an Ex-Officio member. Quarterly reports are offered to the membership regarding systemic issues and any informal hearings held. In this fiscal year, there were no hearings held.

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The MRS field staff are to be commended for their successful efforts of dispute resolution.

As the CAP director awaited appointment, she was an active "unofficial" member on the MRC. After being vacant for nearly two years, the CAP position was filled with the assistant director of Michigan Protection and Advocacy Services, as the CAP Director position was then vacant. In the interim, MPAS has assigned the CAP representation to a staff member. The MRC anticipates a beneficial partnership once the CAP director is hired and subsequently appointed to the MRC.

The state agency indicates that it is able to continue serving all order-of-selection categories. As the demand for MRS services continues to increase and the funding levels remain unchanged, the Council anticipates involvement in discussions with the state agency as they determine their continued capacity to provide services to all customers.

6 - Community Collaboration and Grants: The MRC recognizes that MRS is strongly committed to their ongoing collaborative efforts as established with the independent living partners of MACIL and SILC. The agency has been consistent in their support regarding the expansion of the CIL network, so that a number of emerging CILs have gained financial support as they represent geographic regions of Michigan which were underserved by independent living services.

The Council is supportive of the use of I&E grants for local community or statewide efforts. Grants to CRPs reflect the priority MRS has given to fund local community programs. The MRC views both of these funding streams as having had the propensity to greatly impact the resources available within a given community. In an effort to ensure the quality of this opportunity and to make the most effective use of federal dollars, the MRC recommends that the state agency grant process is expanded to include the strategy of outcome based funding. It is recommended that the agency, in collaboration with council members, and other relevant partners, bring together a work team with the charge of determining the criteria for an outcome based funding model. It is expected that performance indicators would be created for use in quarterly reports to the agency, that each grantee would submit a copy of their annual audit prior to their grant being processed, and that the outcomes be summarized for public consumption. In addition, it is suggested that the agency



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revisit the purpose for the I&E grant program within the purposes of research and development.

IN CLOSING...

The MRC continues to value its partnership with the state agency and works to be utilized by MRS as a resourceful advocate. The membership is committed to a continual learning paradigm related to the systemic issues faced by MRS and how they impact the quality of successful employment outcomes for persons with disabilities. The Council recognizes that in an effort to achieve this end, it is essential that communication efforts be consistent. The focus on the MRC work plan should be the impetus for the achievement of the legislative mandates, and partnerships within statewide disability and/or advocacy organizations must be strengthened.

**State Agency Response:**

In response to the activities, deliberations, and recommendations of the Michigan Rehabilitation Council (hereafter referred to as the council), we would like to note the following.

We are gratified that the council membership is now at full strength. The current membership reflects a substantial achievement of quality and diversity, the strengths and talents of current and new members.

In response to the customer input forums, we would like to express our appreciation for the work of the council in assessing the needs and concerns of consumers. Our recommendation would be the council works with MRS staff to formulate that feedback into a more precise enumeration of concerns that can be operationalized and better responded to by the agency.

We would like to commend the council's spirit of partnership and inclusion in planning, policymaking, and outreach activities. MRS has made a major investment in program evaluation and welcomes the council's specific suggestions regarding MRS program areas to be considered for scrutiny and systematic assessment, e.g., impact of blended staff on quality of service delivery outcomes, use of orientation at intake and accuracy of ARMS input which is currently being studied.

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MRS also agrees with the council that there is merit in studying specific elements of service delivery at the micro level to determine its impact on empowering customers to make informed choice.

A major focus of our efforts in the coming year will be to seek specific ways the agency can support counselors in balancing the various demands of their assignments. This will include the role and effectiveness of supervisory and technical supports, work processes, caseload size and demands, the role of support staff, and agency policy.

In the human resources area, the agency will continue to look for ways to recruit greater numbers of persons with disabilities as well as those representing minority groups.

The council's suggestion that the agency grants processes be expanded to include a strategy of outcome-based findings is an excellent one worth exploring. We welcome the council's offer to participate in a work team charged with determining criteria for such a funding model as we reexamine the focus of both our community rehabilitation and program innovation and expansion grants during this fiscal year.

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**Attachment 4.6(a)(3):** Identification of the Types of  
Activities to Be Carried out under a  
Waiver of Statewideness.

MDCD-RS has developed a policy for the development of activities to be carried out under a waiver of statewideness, which we term our Cooperative Cash Match Agreements. This policy is based on Section 101(a) of the Rehab Act and 34 CFR 361.26 and 361.28 regulations. The MDCD-RS state policy includes the following criteria:

- (1) The non-federal share of the cost of these services is met from funds provided by a local public agency, including funds contributed to a local public agency by a private agency, organization, or individual;
- (2) The goal of the provision of services is to promote the vocational rehabilitation of substantially larger numbers of individuals with disabilities or of individuals with disabilities with particular types of impairments or from particular ethnic populations that have traditionally been underserved by the agency, and other target populations identified in the Rehabilitation Act, such as students with disabilities needing transition services;
- (3) We request a waiver of statewideness on an annual basis in order to provide services to these target groups. The MDCD-RS policy requires each agreement to list the services to be provided to the individuals, contain written assurances as signed by the local public agency that it will make available to the agency the non-federal share of funds, contain written assurance that agency approval will be obtained for each proposed service before it is put into effect, and contain written assurance that the agreement will comply with all state plan requirements for services approved under the waiver, including the state's order of selection requirements.

1. School District Agreements

These joint rehabilitation and school district programs provide coordinated vocational rehabilitation and special education services to eligible youth with disabilities,

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especially significantly disabled youth, within the intermediate school district (ISD) or with local school districts. Emphasis is placed on students in need of transition service planning. The agreements provide for the full array of rehabilitation services, as needed. Referrals are from local high schools or ISD.

The following school agreements are in effect during FY 2002:

<u>Intermediate/Local School District</u>	<u>MDCD-RS District</u>
Shiawassee Regional Education Services	Flint
Genesee ISD (5)	Flint
New Haven High School	Macomb
Mt. Clements High School	Macomb
L'Anse Creuse Schools (Chamber)	Macomb
Macomb Academy	Macomb
Macomb College-Special Needs	Macomb
MISD/Deaf Programming	Macomb
Chippewa Valley Schools	Macomb
East Detroit Schools	Macomb
Richmond High Schools	Macomb
Utica Schools	Macomb
Southwest Macomb Tech Ed. Con	Macomb
Lincoln High School	Macomb
Warren Consolidated Schools	Macomb
MISD-Warren Woods-POHI	Macomb
Armada Schools	Macomb
Center Line Public Schools	Macomb
L'Anse Creuse Public Schools (1)	Macomb
Romeo Community Schools	Macomb
Macomb ISD/Lutz Sch. for Trn.(2)	Macomb
Fraser Public Schools	Macomb
Oakland Schools	Oakland
Rochester Comm. Schools	Oakland
Bloomfield Hills Public Schools	Oakland
Birmingham Schools	Oakland
West Bloomfield Public Schools	Oakland
Royal Oak Public Schools	Oakland
St. Clair Co. ISD (2)	Port Huron
Sanilac County ISD	Port Huron
Tuscola Co. ISD	Port Huron
Lapeer ISD	Port Huron

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Huron ISD	Port Huron
Wayne Co. RESA	Wayne
Wayne Co. RESA-Detroit Public Schools	Detroit East
Dearborn Public Schools	Wayne
Wyandotte Public Schools/J.B. Skills Ctr.	Wayne
Monroe Co. ISD	Wayne
LESA	Ann Arbor
Washtenaw ISD-MAP	Ann Arbor
Washtenaw ISD (3)	Ann Arbor
Jackson Pub. Schs. Spec. Ed.	Ann Arbor
Lenawee Co. ISD	Ann Arbor
Jackson Co. ISD	Ann Arbor
Hillsdale Co. ISD	Ann Arbor
Dickinson-Iron ISD	Marquette
Copper Country ISD/VSI	Marquette
Eastern UP ISD	Marquette
Marquette-Alger ISD	Marquette
Gogebic-Ontonagon ISD	Marquette
Delta Schoolcraft ISD	Marquette
Kent FIA-Cascad-GR Public Schools	Grand Rapids
Kent ISD - ASSETS	Grand Rapids
Kent ISD - Transitions	Grand Rapids
Ionia County ISD	Grand Rapids
Clinton Co. RESA	Lansing
Eaton ISD	Lansing
Ingham ISD	Lansing
Lansing School District	Lansing
ESD-COP	Northern MI
ESD-AMA	Northern MI
RESA Iosco	Northern MI
Traverse Bay Area ISD	Northern MI
Gaylord Comm. Schools	Northern MI
Cheboygan Area Schools	Northern MI
Charlevoix-Emmet ISD	Northern MI
Wexford-Missaukee ISD	Northern MI
C.O.O.R. ISD	Northern MI
Van Buren ISD	Southwest MI
St. Joseph Co. ISD	Southwest MI
Kalamazoo RESA	Southwest MI
Lewis Cass ISD	Southwest MI
Berrien Co. ISD	Southwest MI
Branch ISD	Southwest MI
Calhoun ISD	Southwest MI
Barry ISD	Southwest MI

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Orchard View Schools	West Central
Wexford-Missaukee ISD	West Central
Greenville Public Schools	West Central
Montcalm Community College	West Central
Allegan ISD	West Central
Montcalm ISD	West Central
Ottawa Co. ISD	West Central
Mason/Lake ISD	West Central
Oceana ISD	West Central
Muskegon Area ISD	West Central
Midland Co. ESA	Mid-Michigan
Saginaw ISD	Mid-Michigan
Clare-Gladwin RESD	Mid-Michigan
Bay-Arenac ISD	Mid-Michigan

2. The University of Michigan Office Space and Services of Office, Staff Benefits - Ann Arbor

This joint program provides services to University of Michigan employees with disabilities to enable these workers to return to suitable, productive employment as promptly as possible.

3. Community Mental Health Agreements

These joint rehabilitation and mental health programs operate under an umbrella agreement with separate local contracts. The umbrella agreement is between the Michigan Departments of Career Development and Community Health. The purpose of the umbrella agreement is to permit MDCCD-RS district offices and local community mental health centers to (a) provide for the continuance of cooperative programs; (b) expand current program activities; and/or (c) respond to rehabilitation needs of mentally ill and developmentally disabled people in communities where integrative programs are limited or do not exist.

The individual local contracts are formal agreements for funds and services between MDCCD-RS district offices and community mental health (CMH) boards or centers. Clients must be eligible for vocational rehabilitation services.

The CMH boards provide state and local matching funds, liaison, diagnostic and clinical information, and therapy. MDCCD-RS assigns needed staff and provides the full range of rehabilitation services according to client needs.

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The following CMH agreements are in effect:

<u>Community Mental Health Agency</u>	<u>MDCD-RS District</u>
Genesee County CMH	Flint
Oakland Co. CMH Services	Oakland
Community Mental Health	Macomb
Lapeer Community Mental Health	Port Huron
Huron Behavioral Health Services	Port Huron
St. Clair Co. CMH (3)	Port Huron
Sanilac County CMH	Port Huron
Tuscola County CMH	Port Huron
Wayne County CMH	Detroit East
Monroe CMH Authority	Wayne
Wash. Co. CMH	Ann Arbor
Wash. Co. CMH - Fresh Start	Ann Arbor
Livingston County. CMH	Ann Arbor
Livingston CMH - Genesis	Ann Arbor
Lenawee Co. CMH Ser. Bd.	Ann Arbor
Washtenaw Co. Hlth - CMH	Ann Arbor
Jackson Lifeways	Ann Arbor
Lenawee CMH	Ann Arbor
Gogebic County CMH	Marquette
Northpointe Beh. Healthcare	Marquette
Copper Country CMH	Marquette
Hiawatha Beh. Health	Marquette
Pathways	Marquette
Kent Co. CMH (2)	Grand Rapids
Kent County CMG/Pathfinders	Grand Rapids
Clinton-Eaton-Ingham CMH (2)	Lansing
Manistee/Benzie CMH Serv.	Northern MI
North Central CMH	Northern MI
Great Lakes CMH	Northern MI
Northern Michigan CMH	Northern MI
Northeast Michigan CMH	Northern MI
Au Sable Valley CMH	Northern MI
Antrim/Kalkaska CMH	Northern MI
Van Buren Co. CMH	Southwest MI
St. Joseph Co. CMH	Southwest MI
Branch Co. CMH	Southwest MI
CMH of Barry Co.	Southwest MI
Woodland Beh. Healthcare Ctr.	Southwest MI
Kalamazoo CMH	Southwest MI
Riverwood CMH	Southwest MI
Ottawa Co. CMH	West Central

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Allegan Co. CMH	West Central
Montcalm Ctr. for Behav. Hlth.	West Central
Saginaw Co. CMH Auth.	Mid-Michigan
Bay-Arenac CMH Serv. Board	Mid-Michigan
Central Michigan CMH	Mid-Michigan

4. Tri-Party Agreements

These agreements represent collaborative programming between MDCD, CMH, and ISDs. The purpose of these types of agreements is to promote efficient coordination of comprehensive services necessary for youth with developmental and mental/emotional disabilities to achieve vocational/career preparation while in high school and more efficiently transition into suitable employment following education. The collaboration of these three entities promotes more cost-effective use of limited funds to serve more individuals from a targeted population (school youth). Referrals are made from either local CMH or ISD.

The following tri-party cooperative agreements are in effect:

<u>Agency</u>	<u>MDCD-RS District</u>
Muskegon Area ISD & CMH	West Central
Newyago Co. CMH & ISD	West Central
Central MI CMH & Mecosta/Osceala ISD	West Central
Copper Country ISD/CMH	Marquette
Nthpointe Beh. Healthcare	Marquette
Manistee ISD/CMH	Northern
Livingston Co. CMH Serv.& LESA	Ann Arbor
Gratiot-Isabella RESD	Mid-Michigan
Gratiot CMH	Mid-Michigan

5. Other Agreements

Rehabilitation programs have been jointly developed with county departments of the Family Independence Agency (FIA) and other agencies to expand the delivery of rehabilitation services to local individuals who meet MDCD-RS eligibility requirements.

The following cooperative agreements are in effect:

<u>Agency</u>	<u>MDCD-RS District</u>
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Macomb Community College	Macomb
Oakland Community College	Oakland
St. Clair Office of Substance Abuse	Port Huron
St. Clair Co. FIA	Port Huron
Detroit Rescue Mission	Detroit West
Sickle Cell Disease of America	Detroit West
SEMCA	Wayne
Family & Neighborhood Svcs.	Wayne
Schoolcraft College (2)	Wayne
Hillsdale Co. FIA	Ann Arbor
Lenawee Co. FIA	Ann Arbor
Washtenaw-Livingston CSA	Ann Arbor
Lenawee Co. Probate Court	Ann Arbor
Hannahville Indian Comm.	Marquette
Dickinson County Commission (TRICO)	Marquette
Kent County - Exodus Ministries/Hope	Grand Rapids
FIA/Sojourners - TBI	Grand Rapids
Kent ISD/Lions-Deaf/HH	Grand Rapids
FIA/Faith - Homeless	Grand Rapids
Kent Co. Health Dept.	Grand Rapids
Ingham Co. FIA	Lansing
Mid-South Sub. Abuse Com.	Lansing
Northern MI SAS, Inc.	Northern MI
Kirtland Community College	Northern MI
Northwestern Michigan College	Northern MI
North Central Michigan College	Northern MI
Alpena College	Northern MI
Calhoun Area Tech Center	Southwest MI
Kalamazoo Co. Human Serv.	Southwest MI
Kalamazoo Co. FIA (2)	Southwest MI
Berrien Co. FIA	Southwest MI
Mid-South Sub. Abuse	Southwest MI
Northern Michigan SAS	Mid-Michigan
Muskegon Community College	West Central

Statewide Agreements

Goodwill Ind. of Greater Detroit	Macomb
Farm Rehabilitation-Easter Seals	Port Huron
MACIL	CDD
School for the Deaf	Flint

MDCD-RS will seek cash match agreements in fiscal year 2002 to augment funds and to develop specific targeted agreements with local agencies.

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**Attachment 4.9(c):** Interagency Cooperation with Other Agencies  
and Entities.

(1) Cooperation with Agencies That Are Not in the Statewide  
Workforce Investment System and with Other Entities

The agency cooperates with other federal, state, and local public agencies, which are not a part of the statewide workforce investment system, to provide comprehensive services related to the rehabilitation of individuals with disabilities.

The agency has a long established practice to develop and refine interagency agreements with a variety of federal, state, and local agencies and programs. These include the Michigan Department of Community Health (MDCH) to develop a coordinated agreement for utilization of Medicaid; Family Independence Agency (FIA) to promote collaborative services for adjudicated youth and to promote education of employers in hiring persons with disabilities; an interdepartmental workgroup from Michigan Rehabilitation Services, Family Independence Agency, and Michigan Department of Community health to work on implementation plans for integrating the components of the Ticket To Work/Work Incentives Improvement Act (TTWWIIA); Michigan Works! Association in partnership with the agency and other councils, agencies and advocacy organizations to administer grant funds received from the Department of Labor (DOL), which will promote employment services for persons with disabilities in One Stop Centers. Work continues with regional and local district offices of the Social Security Administration to establish and improve the relationship for implementing features of the TTWWIIA. These agreements will allow the agency to establish cooperative relationships for full utilization of services and facilities not carried out through the statewide workforce investment system. The state agency will continue interagency cooperation with, and utilization of, the services and facilities of the federal, state, and local agencies and programs, including programs carried out by the Under-Secretary for Rural Development of the United States Department of Agriculture and state use contracting programs to the extent that such agencies and programs are not carrying out activities through the statewide workforce investment system. These agreements will promote informed choice and enhanced employment outcomes for persons in rural areas and/or

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persons who wish to pursue agrarian employment outcomes throughout the state of Michigan.

The agency usually reviews development of interagency agreements to ensure they are meeting objectives, goals, and priorities. The agency workgroups consist of field personnel, administrative staff from the agency, community partners, other state agencies and the Michigan Rehabilitation Council (MRC) members to develop agreements that make full utilization of federal, state and local resources.

The statewide interagency agreement with MDCH will focus on: (a) the promotion of complete and timely access to Medicaid coverage for persons with disabilities; (b) collaborative practices with Medicaid managed care; (c) potential buy in for persons with disabilities who are working but need expanded coverage; (d) expand understanding of the Medicaid process to agency staff to assure their ability to work with physicians and health maintenance organization representatives; (e) fiscal responsibilities; and (f) reimbursement policies.

One interagency agreement with FIA targets youth at risk within the adjudicated youth program sponsored by FIA. The agreement provides outreach and targets underserved minority youth populations. A second FIA interagency agreement utilizes the governor-appointed, consumer-directed Commission on Disability Concerns to network with and educate employers on ADA and the benefits of hiring workers with disabilities. It also links with other networks of consumer groups to provide support in the local communities for the agency's priorities.

The agency is implementing two new interagency agreements with Michigan State University. One is a three-year agreement, called Project Excellence, with the purpose of linking the university's research and evaluation capabilities with the agency's needs for continuous improvement measures. The second project establishes student internships that support CSPD recruiting efforts from the three state universities that have CORE-approved master's degree programs in vocational rehabilitation counseling.

The agency has in place Memoranda of Understanding (MOU) with all Workforce Investment Boards (WIB). These

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agreements focus on providing a full range of employment related services for persons with disabilities including training and support services.

Key items which will be included in all interagency agreements encompasses the provision of intercomponent training and technical assistance on the role, function and requirements of the vocational rehabilitation program, to promote the equal, effective and meaningful participation by individuals with disabilities in workforce investment activities; the designation of lead agency; the use of information and financial management systems that link all components of the statewide workforce investment system; use of customer service features, such as a common intake and referral procedures, customer databases, resource information, and human services hotlines; establishment of relationships with employers to support the employment of individuals with disabilities, particularly, individuals with the most significant disabilities; identification of staff roles, responsibilities and available resources together with the specification of financial responsibility of each component of the statewide workforce investment system for paying for services; and specification of dispute resolution procedures.

(2) Coordination with Education Officials.

The state vocational rehabilitation agency will continue to coordinate services and activities with education officials to facilitate the transition of students with disabilities from school to the receipt of vocational rehabilitation services. At the secondary level, it also coordinates the development and approval of an individual plan for employment (IPE) at the earliest possible time during the transition planning process that VR services are appropriate. In 1999, an interagency agreement was signed with the lead agency, the Department of Education, Office of Special Education and Early Intervention Services, to support the seamless transition of students from school to adult life that facilitates the development and completion of their individualized educational program (IEP) under section 614(d) of the Individuals with Disabilities Act. The agreement addresses key items identified in the Act, including:

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- Identification of and outreach to students with disabilities who need transitional services.
- The provision of training and technical assistance on the role function and requirements of the vocational rehabilitation program and coordination of transition services with the schools. MRS has determined the criteria for qualified vocational rehabilitation counselors; the lead agency, the Office of Special Education and Early Intervention Services has determined the criteria for transition coordinators. The Transition Services Project, a joint endeavor of the state unit and the Department of Education, will provide training statewide to educate and promote the mandate for transition services, and provide joint training of counselors and coordinators, emphasizing the collaborative requirements of the process and including key stakeholders as trainers and audience. This will promote the equal, effective and meaningful participation by individuals with disabilities in workforce investment activities.
- The inclusion in all MRS district business plans of a description of identification and outreach strategies, community development plans, and capacity building. The agreement monitors and assures that district office plans address outreach to youth and students with disabilities from underserved populations such as minorities and at risk populations. Data and management reports will be provided to support the development of business plans that result in improved outcomes for all youth, with emphasis on improved outcomes for minority and at risk youth.
- Identification of and outreach to students includes the assignment of rehabilitation staff to schools, education systems, and intermediate school districts to act as liaison and outreach agents. Transition coordinators in the schools designated by the education agency through the Transition Services Project work cooperatively with designated rehabilitation staff to identify students who qualify for services. Identification of and outreach to students includes a description of the vocational rehabilitation program, eligibility requirements, application procedures, and the scope of services available to eligible students. It also monitors and

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assures that district office plans address services to students eligible under Section 504 of the Rehabilitation Act and eligible incarcerated youth.

- The sharing of information and use of financial management systems that link all components of the statewide workforce investment system. Agreements between entities at the local level address the use of financial resources and specify data sharing activities.
- Description of specific roles and responsibilities at the state level that provide guidance to local entities on the development and use of common intake and referral procedures, common data bases and resource information.

The agreement is designed to act as a template or model for the subsequent development of local partnership agreements that address school to work activities or what is becoming known in Michigan as the Career Preparation system.

Both the schools and the state vocational rehabilitation agency have established strong relationships with employers to support the employment of individuals with disabilities as evidenced by supported employment outcomes and rehabilitation employment outcomes. The emerging Career Preparation system will link not only the schools, the state vocational rehabilitation agency and the workforce investment agencies, but it will routinely include employers in the planning and implementation arena.

An agreement with Post Secondary Services addresses the roles and responsibilities, including financial, to support an individual's participation in postsecondary education. This state level agreement is expected to provide guidance and act as a model for the development of local agreements that may contain specific provisions for the financial responsibilities of all parties to the agreement.

Postsecondary Services recently moved from the Department of Education to the Department of Career Development by Executive Order. Placement within this department means that we will be engaging in a memorandum of understanding or an interagency agreement versus an interdepartmental agreement as originally expected.

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(3) Cooperative Agreements with private Non-Profit Vocational Rehabilitation Service Providers.

The State Unit will develop standards consistent with 34 CFR 361.51 pertaining to the accessibility of facilities, personnel standards, and the prevention of fraud, waste and abuse in establishing cooperative agreements with private non-profit vocational rehabilitation services providers. These standards will also incorporate consumer informed choice, qualification criteria and outcome and performance measures.

The Agency has established relationships with private non-profit organizations that are community rehabilitation providers, medical service providers, and providers of other services and supports that are required by customers to achieve the goals in their Individualized Plans for Employment. These services include medical and psychological assessments and services, job development and employer services, job coaching and facilitation, accommodations and ergonomics, independent living services to support employment goals, follow up services, and other services especially for individuals with significant disabilities. The agreements vary from information and referral relationships, cash match agreements, fee for service relationships, to grant relationships. Quality, cost, and effectiveness are reviewed annually. Customer satisfaction with the services is obtained prior to payment. Vendors and community partners are informed of the Agency strategic goals and are involved in, or provide input into, district work plans and community resource development. District staff develops relationships in the community to meet the needs of their customers and to provide choice of providers to their customers. The Agency Director has developed a positive working relationship with the MARO Employment and Training Association, to develop the standards consistent with the Rehabilitation Act.

The state's Independent Living/Centers for Independent Living (IL/CIL) program is a major source of program collaboration and cooperative agreements, at both the state and local levels. The IL/CIL program is established by the Michigan State Plan for Independent Living (SPIL) in accord with public policy commitments of the federal Rehabilitation Act. The program is responsible for the development and support of a statewide network of consumer-run Centers for Independent Living (CILs) and community IL

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supports that help people with disabilities exercise self-determination and participate fully in their communities. One role of the statewide IL/CIL network is to function as an essential part of the state's comprehensive workforce development and rehabilitation system, serving to facilitate the delivery of vocational rehabilitation and other workforce development services and to promote consumer success in obtaining, maintaining, and advancing in employment.

As the responsible administering agency for the IL/CIL program, MRS is providing a FY 2001 total of \$5 million in grants -- \$2.1 million of which is Title I VR funding for vocationally related services to MRS customers. The IL/CIL grants go to 17 private, non-profit organizations, which include ten full-functioning CILs, five communities with developing CILs or CIL planning initiatives, and two statewide organizations (the Statewide Independent Living Council (SILC) and the Michigan Association of Centers for Independent Living (MACIL)). Overall the network plans are to provide a total of 88,500 hours of community services and have 27,500 individuals participate in CIL services during FY 2001.

At the state level, the SPIL reflects cooperative agreement among the three SPIL Partners, which include the SILC, the Michigan Commission for the Blind, and MRS. The SPIL is also developed in collaboration with community partners, including the non-profit organizations of MACIL and the Michigan Disability Rights Coalition (MDRC). The MRS grant agreements with SILC and MACIL specify cooperative agreements for implementation of the SPIL as well as development and support of the CIL network during the year. Each CIL has a comprehensive grant agreement with MRS that specifies the array of its commitments to meet federal CIL standards and carry out the full range of its responsibilities under the SPIL. One part of each grant is a local level collaborative agreement detailing the cooperative arrangements between the CIL and local MRS office for the direct delivery of services to MRS customers in support of vocational goals. Each local agreement addresses needs and services determined most appropriate for the community, reflecting both MRS priorities (such as services to youth with disabilities) and the ongoing MRS/CIL collaboration. Service areas most often included in these local agreements are prevocational empowerment services to help MRS consumers prepare for employment,



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long-term support services to help MRS consumers maintain and advance in employment, and transitional services to help students prepare for the move from school to adult life and employment in the community. Many of the agreements also address the development of community partnerships to facilitate vocational outcomes and outreach to minority, unserved, and underserved populations.

Details of the statewide IL/CIL program, including its cooperative agreements, are provided in the SPIL and in the related annual 704 Performance Report. In planning activities during the last year, the SILC and other SPIL partners have been emphasizing the development and expansion of a variety of partnerships and cooperative agreements. These will be reflected in the new SPIL for fiscal years 2002-2004.

(4) Evidence of Collaboration Regarding Supported Employment Services and Extended Services

The state vocational rehabilitation agency has maintained a long-standing agreement with the Department of Community Health for the provision of extended services for individuals with the most significant disabilities. This agreement has been operationalized at local levels through the creation of specific partnership agreements between Community Mental Health, Vocational Rehabilitation and typically a community rehabilitation organization. With the move by the Department of Community Health to a managed care contract with local community mental health boards, there is now an opportunity for expansion of extended services. In 1998, a set of guidelines for the provision of supported employment services was jointly issued by the Department of Community Health and the State Unit. The policies and collaboration were reconfirmed in FY 2000 to staff and providers. This document was jointly developed and distributed to assist communities in the development and expansion of supported employment services. The State Unit engages in a monthly meeting with mental health officials to support continued collaboration for the provision of supported employment services and other mutual services required for successful employment and independent living outcomes.

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**Attachment 4.11(b):** Comprehensive System of Personnel Development

Regulation:

The designated State agency has implemented a comprehensive system of personnel development that meets the requirements of section 101 (a)(7) of the Act and 34 CFR 361.18

Compliance Strategy:

Michigan Department for Career Development-Rehabilitation Services (MRS) is in the third year of implementing a five-year plan to demonstrate compliance with the comprehensive system of personnel development (CSPD) regulations. The objective of this plan is to assure that persons with disabilities are receiving needed services by staff who are qualified in their respective fields. The following definitions clarify the state standard of qualified rehabilitation counselor, qualified vocational technical teacher, qualified rehabilitation assistant, and qualified interpreter. These definitions are based on standards **which are consistent with the highest requirements in the state:**

- A qualified rehabilitation counselor is defined as counselor with a master's degree in rehabilitation counseling or guidance and counseling or related counseling field which required a supervised internship or has attained the educational standards established by Commission on Rehabilitation Counselor Certification for a certified rehabilitation counselor (CRC).

Having a master's degree in an unrelated field is no longer sufficient for entry-level employment as a rehabilitation counselor. An unrelated master's degree is defined as a special education degree, social work degree, etc.

Currently employed counselors with master's degrees in unrelated fields must complete all course work they are lacking which demonstrates they have attained the educational requirement consistent with the Certified Rehabilitation Counseling (CRC) standards by year 2005 or by 2010 if they are person with a disability that affects their life span or physical stamina.

If any case carrying staff do not attain such educational standards by their designated compliance date they will relinquish their title of "counselor" and be reassigned duties consistent with their educational level, skills and abilities. Therefore, a counselor who does not attain the

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educational standards will not be permitted to determine eligibility or be involved in plan development, amendments, or closures unless assisted by a qualified rehabilitation counselor.

- a vocational technical teacher or instructor employed by the state agency must demonstrate that they are qualified in their respective field by having the appropriate educational degree or work experience, teaching methodology course work or seminar as required by the state technical school's accrediting agencies. Also, such teacher must attend, at least, every five years an in-service training program on disability sensitivity, informed choice and acquisition of needed reasonable accommodations or modifications.
- a qualified rehabilitation assistant is a staff who annually attends all training programs which they and their respective supervisor have deemed necessary.
- the State standard for a qualified interpreter is one who is certified by the Registry for Interpreters for the Deaf (RID ), possesses a Level III or Interpreters Certification and/or Transliteration Certificate and is an interpreter of the customer's choosing.

The MRS CSPD plan has four implementation phases for attaining and maintaining a qualified work force who meet the standards that are based on the highest requirements in the State. A fourth phase was added last fiscal year and addressed the addition of the 2010 compliance date for six staff with disabilities that impact on their physical stamina and/or life expectancy.

Funds have been committed to provide needed training for current staff from the state's in-service training grant and a long-term CSPD training grant from RSA. The MRS Plan assures that personnel will complete training and have access to developmental interventions needed to meet the standards in a timely manner. The CSPD plan phases and their outcomes are outlined on the following page:

Phase One FY99-FY00: The Diagnostic Phase

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1-educate the workforce to the qualified standards and agency commitment to assisting them with attaining such standards;

2-determine the gap between each employee's current educational levels and the previously mentioned qualified standard by conducting a survey of all current case carrying personnel. Collection of this data and analysis of these survey results will determine who needs additional academic training, which assures that they have attained the educational standards consistent with the certified Rehabilitation Counseling (CRC) standards;

3-educate staff to the funds available to assist staff in pursuing needed academic course work; and

4-develop a database for tracking each employee's educational levels and progress toward attaining the status of being "qualified" in their respective fields.

Phase Two FY00-FY04: The Implementation Phase

1-maintain established database;

2-track staff's progress toward attainment of qualified standards;

3-educate personnel involved in hiring on how to assure that qualified applicant pools are being utilized;

4-assist higher education institutions with RSA funding in Michigan with recruitment and retention efforts.

Phase Three FY 04-05: The Evaluation Phase

1-assess the effectiveness and efficiency of the CSPD; and

2-update data on projected workforce needs for the next five years.

Phase Four FY05-FY10: The Compliance Phase Of Six Staff with Disabilities

1-provide ongoing support to the six staff with disabilities that have a compliance date of 2010

2-see additional funding sources to maintain educational opportunities for all personnel;

3-educate staff to the CSPD direction for the next five years; and

4-reassign any counselors who did not attain the required educational standards and limit their scope of practice.

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Section 4.11(b)(1:i-iii)

Regulation:

Collection and analysis on an annual basis of data on qualified personnel need and personnel development consistent with the provisions of 34 CFR 361.18(a).

Compliance Strategies:

The following four tables indicate that the data needed for compliance to Section 4.11(b) (1:i-iii) has been updated for this fiscal year. The four tables will present data as follows:

- Table One demonstrates that data is being collected to document the number of personnel who provide vocational rehabilitation services broken down by personnel category (361.18(a)(1:i-ii)).
- Table Two demonstrates the number of personnel who will be needed by the State agency to provide vocational rehabilitation services in five years based on projections of the number to be served including the numbers of personnel expected to retire or leave the field (361.18(a)(1:iii)).
- Table Three demonstrates that data is being collected to document the adequacy of a qualified applicant pool of graduates from the post-secondary institutions in Michigan with RSA funding (361.18(a)(2:i-iii)).
- Table Four documents the current number of agency's counselors that have the certified rehabilitation counseling certificate, master's degree in rehabilitation counseling, master's degree in related field, and which counselors will need to pursue additional course work to attain the state standard of qualified rehabilitation counselor.

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Table One  
361.18(a)(1:i)

Personnel Category	Number of State Employees
*Rehabilitation Coordinators	6
Rehabilitation Counselors (masters degree)	270
Rehabilitation Educators (voc. technical center teachers)	22
Site managers who may carry a caseload (masters degree)	33

\* Rehabilitation Coordinators are bachelor-leveled counselors who are targeted in the development plan to attain their master's degrees.

DATA SOURCE: MAIN Data Base-Payroll #3 Category, ending 2/05/02.

The following table illustrates the number of anticipated retirees and number of anticipated customers at the beginning of FY 06. The annual turnover rate of counselors remains constant at 10% and those positions are traditionally filled immediately. The contingency plan, in case of a governmental hiring freeze, is to utilize the local site managers who meet the standards of a qualified rehabilitation counselor to cover caseloads left by staff vacancies, if needed. The agency's current counselor to customer ratio remains at an average 1:118 for rehabilitated customers. The ratio of current counselors to all customers, rehabilitated or not, is 1:160. It is anticipated that 25 additional counselors would be needed by the beginning of FY 06 if a) MRS maintains the current staff ratio of 1 counselor to 102 rehabilitated customers, b) if the percentage of

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rehabilitated customers ranges between 49%-58% of all customers served, c) if the projected growth in customers served has been projected correctly at 3% gain annually, d) if Ticket to Work voucher recipients has minimal impact on customer seeking public VR services, and e) if the agency maintains an FTE count of 270 counselors by filling immediately all vacated positions.

Table Two  
361.18(a)(1:iii)

	Number of projected individuals with disabilities that will be served in 2005-06 (based on an annual increase of "clients served" of 35)	Number of anticipated retirees by year 2006-07
Rehabilitation Counselors	52,287	*See below

\*Three factors are influencing the calculation of needed counselors by MRS in 2006. First, MRS senior managers are currently developing a succession plan as our state may offer an early retirement option following the next gubernatorial election and we want to be sure we are not only prepared for counselor staffing issues but also have a sound plan for replacing management and administrative staff. However, the current enrollment and graduation rates at the three CORE accredited master's rehabilitation counseling programs in the state is expected to continue to provide an adequate pool of qualified applicants for counselor positions. Third, the year to date acceptance rate of customers seeking services is 88% (DATA SOURCE: Alliance Performance Statistics Report, 2/04/02) and the agency strives to maintain or exceed this acceptance rate.

The following table documents the current enrollment and graduation rates at the three CORE accredited rehabilitation counseling programs in Michigan.

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Table Three  
361.18(a)(2)(i-iii)

CORE accredited Higher Education Institutions	Western Michigan	Michigan State	Wayne State University
Current enrollment in rehabilitation counseling master's program	12	36	54 (19 have disabilities)
Number of minority students that graduated in the last year	3	7	28
Number of FY 00-01 graduates from rehabilitation counseling programs	6	16 (2 had disabilities)	6

The following table indicates that 95 percent of the agency's current case-carrying staff are in compliance with state standard of qualified rehabilitation counselor.



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Table Four  
Current Level of Compliance

<u>Educational Standard</u>	Number of case carrying staff N=270
Have already attained the educational standard of a qualified rehab. counselor by having a master's degree in Rehabilitation Counseling, Guidance and Counseling, Related Counseling Field and/or are CRC certified.	256 Of 270 =95% compliance rate
Will attain their needed educational standards by the approved compliance date of September 2005 and have shown annual substantial progress toward attainment	6
Potential retirees expecting to retire before September 30, 2005 and/or staff scheduled to attain their needed educational standards by September 2010 due to receiving a reasonable accommodation for a time extension under the ADA	8 (5 of the 8 are currently applying for an ADA accommodation)

DATA SOURCE: MAIN Data Base - Payroll # 3 Category, 2/04/02

This fiscal year the educational degrees of all site managers who occasionally may need to carry a caseload and provide the four core services were evaluated for compliance with the state definition of a qualified rehabilitation counselor. These site managers occasionally inherit a caseload when a counselor may be placed on emergency medical leave or in case of a hiring freeze that prevents immediate replacement of a counselor. Thirty-two of the thirty-three site managers have the necessary educational degrees needed to be a qualified rehabilitation counselor in the

State of Michigan. In the geographic areas where the one site manager has an unrelated master's degree but we have a district manager whose educational degrees are in compliance with the state standard for a qualified rehabilitation counselor and, therefore, would provide emergency caseload coverage.

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DATA SOURCE: FY 2002 CSPD Databank

Compliance Strategy:

To assure that all case carrying staff attain the standard of a qualified rehabilitation counselor by the target dates of September 30, 2005 or 2010 if they are staff member with a severe disability, the following prioritization process will be implemented. This process reflects four values, which indicate which case carrying staff will receive access to the CSPD, grant funds and other tuition reimbursement funds first. These values are:

- 1) that the case carrying staff with the greatest educational deficits will be prioritized first,
- 2) case carrying staff with the greatest years of employment remaining to the state agency will also be prioritized,
- 3) counselors with disabilities which impact on life span or physical stamina (n=6) will have a compliance date of September 30, 2010.
- 4) Case carrying staff with the least amount of employment years (potential retirees before 2005) remaining with MRS will be prioritized last.

**Section 4.11(b)(2)**

Regulation: Plan to address the current and projected needs for qualified rehabilitation personnel including the coordination and facilitation of efforts between the designated State unit and institutions of higher education and professional association to recruit, prepare, and retain qualified personnel, including personnel from minority backgrounds, and personnel who are individuals with disabilities (34 CFR 361.18);

Compliance Strategies:

MRS has had long commitment to recruiting and retaining staff that are representative of minority cultures and persons with disabilities. The general population of Michigan has a minority population of 17%. (DATA SOURCE: 1999 US Census Information) MRS has established a strategic goal that the agency will, at minimum; maintain that at least seventeen percent of the state

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agency work force is representative of persons from minority backgrounds and/or individuals with disabilities. Twenty five percent (up 2% from previous year) of the current agency workforce is a minority with 12 percent being persons with disabilities. To assure that such percentages are maintained, the following retention and recruitment activities will occur annually:

RETENTION ACTIVITIES

- Encourage staff involvement in their respective professional organizations, nationally and at the state level so networking with other rehabilitation professionals is possible;
- Complete exit interviews targeting, at a minimum, all minority personnel leaving the state agency as an effort to determine retention strategies,
- Invest in staff growth and development by providing training opportunities through various teaching modalities such as on-line. In October 2001, MRS received the RSA Commissioners Award for its' on-line learning system.
- By 2003, develop a plan for retaining more staff of color or with disabilities based on the data gathered in exit interviews

RECRUITMENT ACTIVITIES

- Assess and monitor the enrollment at the higher education institution within the state with an emphasis on the RSA funded master's programs
- Facilitate the visibility of the State unit at the institutions of higher education by:
  - a) Allowing MRS personnel to serve on university's curriculum committees and as adjunct faculty and guest lectures;
  - b) Continue to be the most utilized placement and intern sites by the institutions of higher education; all employment opportunities with MRS are posted on the Internet. The MRS web page lists all available positions as well as the process for applying. The Michigan Civil Service

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Web page, which lists all state government job postings, allows quick linking to the agency's job postings. Also, all MRS counselor positions are posted on the Rehabilitation Recruitment Center at the National Clearinghouse of Rehabilitation Training Materials web page, which provides for a national drawing of qualified applicant.

- Annually distribute employment brochures to the student attendees at the National Conference of Rehabilitation Educators, CSAVR and RSA.
- Maintain paid internships opportunities for students participating in master's graduate programs in rehabilitation counseling programs, and
- Distribute a staff recruitment video to all CORE accredited master's program explaining the employment opportunities with MRS and the benefits of residing in Michigan.
- List all available job vacancies with the Rehabilitation Recruitment Center at the National Clearinghouse.
- Encourages staff to assist customers interested with becoming a rehabilitation counselor by developing Individual Employment Plans reflective of such vocational goal. And required educational standard.

**Section 4.11(b)(3)**

Regulation: Establishment and maintenance of personnel standards meeting the requirements of 34 CFR 361.18(c) to ensure that personnel including professionals and paraprofessionals are adequately retrained and prepared including:

- (A) standards that are consistent with any national or State-approved or recognized certification licensing registration or in the absence of these requirements. Other comparable requirements that apply to the profession or discipline in which such personnel are providing vocational rehabilitation services; and
- (B) to the extent that such standards are not based on the highest requirements in the state applicable to a particular profession or discipline the steps the State is currently taking and the steps the State plans to take to retrain or hire personnel within the designated State unit so that such personnel meet standards that are based on the highest requirements in the state;

**Compliance Strategy:**

The State of Michigan does not have any established state personnel standards, which define what is a qualified rehabilitation counselor, vocational technical teacher or rehabilitation assistant. Therefore, MRS has defined these terms as listed as below. The State of Michigan does have a standard that clarifies what is a qualified interpreter and MRS utilizes this standard when hiring or contracting with interpreters.

- A) A qualified rehabilitation counselor is defined as counselor with a master's degree in rehabilitation counseling or related field such as guidance and counseling. Having a master's degree in an unrelated field is no longer sufficient for entry level employment as a rehabilitation counselor. An unrelated master's degree is defined as a special education degree,

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social work degree, etc. Currently employed counselors with master's degrees in unrelated fields must complete all course work they are lacking which demonstrates they have attained the educational requirements consistent with the Certified Rehabilitation Counseling (CRC) standards by year 2005. If they do not attain such educational standards they will relinquish their title of "counselor" and be assigned duties consistent with their skills, educational training and experiences. They will not make eligibility determination decisions or be involved in plan development/amendments, closure or authorizations without the assistance of a qualified rehabilitation counselor.

- B) A vocational technical teacher and instructor employed by the state agency must demonstrate that they are qualified in their respective field by having the appropriate educational degree or work experience, teaching methodology course work or seminar and attend, at least every five years, an in-service training program on disability sensitivity, informed choice issues and reasonable accommodations for the classroom.
- C) A qualified rehabilitation assistant is a staff who annually attends all training programs, which they and their respective supervisor have deemed necessary.

The steps MRS is planning to take to assure that qualified staff are hired or current staff attain the level of being qualified are:

- 1) provide on-going training to all district managers and site managers meeting on appropriate hiring procedures;
- 2) provide funding for staff seeking to take needed course work to attain the level of qualified counselor. An RSA long-term training grant has been awarded to MRS with the project beginning on October 1, 1999. The amount of this grant is \$927,346.00 over five years. Combining this grant with in-service training dollars will provide the needed funding to attain the desired outcomes of the CSPD plan;
- 3) establish a database for monitoring staff's progress toward attaining the level of being "qualified";
- 4) perform an annual training needs assessment of all staff which include training opportunities needed by the vocational technical teachers to attain the level of qualified i.e. disability sensitivity, informed choice, and identifying reasonable accommodations; and

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- 5) establish an electronic bulletin board listing private sector training programs available;
- 6) to draw national applicant pool of potential rehabilitation counselors, MRS will continue to post all counselor employment vacancies with the Rehabilitation Recruitment Center: National Clearinghouse of Rehabilitation Training Materials electronic bulletin board;
- 7) maintain paid internships for graduates of CORE accredited graduate programs.

**Section 4.11(b)(4)**

Regulation: standards to ensure the availability of personnel within the designated State unit or other individuals who are, to the maximum extent feasible, trained to communicate in the native language or mode of communication of an applicant or eligible individual;
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Compliance Strategy:

MRS has taken the initiative to hire qualified counselors who are bi-lingual in Spanish or Arabic if the local community has a large population of such ethnic groups. Also, each office has posted agency information in English and Spanish clarifying that bilingual counselors and program materials are available in customer's native language. Qualified sign language interpreters are contracted with an as needed basis except at the agency's technical school where interpreters hold FTE positions. The definition of a qualified interpreter in the State of Michigan is found on page 2 of this document.

Personnel are also trained to understand the following agency policy, which indicates a further commitment to communicating in a customer's native language:

MRS 1.0125 CLIENT INFORMED CHOICE

....Applicants and eligible individuals shall be informed through appropriate means of communication, about the availability and scope of informed choice....

**Section 4.11(b)(5)**

Regulation: staff development to ensure that all personnel employed by the designated State unit
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receive appropriate and adequate training 34 CFR 361.18(d);
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Compliance Strategy:

#### POLICY REFERENCE

According to the State of Michigan's Civil Service three year Strategic Plan dated April 2000, the state of Michigan has continued its commitment to having a well-trained and effective workforce in state government.

#### PROCEDURES AND ACTIVITIES

To ensure that all rehabilitation personnel, especially professional and paraprofessional staff, are appropriately and adequately trained and prepared, an annual training needs are compiled. Topics suggested are drawn from the CRC knowledge domains and agency position descriptions i.e. essential job functions for each job position. Also, topics are representative of RSA priorities and the emerging trends in each staff member's profession. Reviewing the current Institute on Rehabilitation Issue documents as well as the RSA priorities assures that the needs assessment is representative of current research findings. The current RSA priorities are viewed as informed choice, rehabilitation technology, the Rehabilitation Act as amended, the Americans with Disabilities Act, IDEA and Social Security work incentives.

#### CURRENT NEEDS ASSESSMENT RESULTS

Following is a summary of the most frequent identified training needs for FY 01.

Due to the implementation of the computer in the daily work place and with the case files having been moved into an automated case management system, software-training needs are evaluated as an on-going process. Any staff member can access the software training company's training calendar for a needed course then they inform their immediate supervisor.



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Table V: 2001 Training Needs

<b>Counseling Topics</b>	<b>Managerial/Supervisory Topics</b>	<b>Organizational Topics</b>
Vocational Counseling Theories, Techniques and Case Documentation	Ticket to Work Legislation	Establishing Systems that Assures Accountability
Negotiation Skills	Negotiation Skills	Building A Service Delivery System which Values Cultural Competency
Principles and Practice of Informed Choice	Budget/DAFR Reports	Getting Desired Outcomes from Work Teams
Transferable Skills Assessment	Team Building	Developing the Desired Agency Culture
Using Automated Case Management System to Produce Local Production Reports	Hearings/Appeals	Staffing Criteria
Ticket To Work and Social Security Work Incentives et al		
Working Effectively with Special Populations and Culturally Diverse Clients		
Assistive Technology and the Severely Disabled		

In FY 01, three training/organizational development initiatives continued which reflect MRS's further compliance to ensure that all personnel employed receive appropriate and adequate training. They are:

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- 1) Training Academy: The New Staff Training Academy was developed for new counselors and newly hired contract staff. This continues as a three part series providing an overview to the history of the public rehabilitation program and process, cultural diversity issues, agency values, and informed choice.
- 2) The School of Leadership continues with 24 staff being involved in FY 00. This School meets four times a year with structured learning activities, which encourage the development and expression of leadership. These 24 participants were selected from all levels of employment within the agency and not just management. This development of leadership is seen as an important element in succession planning.
- 3) All agency staff have completed a two part-training program on how to use the agency's new automated case management system and during the next year will complete Phase Three which deals with generating local production reports from the system.

MRS is also currently involved in an organizational culture audit process, which involves identifying the levers of change that each office needs to address to build capacity toward a customer and employee friendly and satisfying work place. The cultural audit will have relevance in consideration of staff capacity building, reorganization, and issues of succession planning.

The funding of other training activities is through the RSA in-service training grant funds supplemented through Title I dollars. These funds are allocated to the central office for statewide initiatives as well as to local offices and divisions so that local training opportunities are easily coordinated. Staff is also encouraged to take advantage of training opportunities offered by their respective professional organizations and with their community partners.

Section 4.11(b)(6)

Regulation: coordination of its personnel development system with personnel development under the Individuals with Disabilities Education Act (Section 673).
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Compliance Strategies:

The intent of the Individuals with Disabilities Education Act (IDEA) Section 673 is two fold.

- 1) to help address State-identified needs for qualified personnel in special education, related services, early intervention, and regular education, to work with children and disabilities; and
- 2) to ensure that those personnel have skills and knowledge, derived from practices that been determined, through research and experience, to be successful, that are needed to serve those children.

MRS has a long partnership with the public school system including a formalized interagency agreement between the Michigan Department of Education Office of Special Education and Early Intervention Services and MRS. This interagency agreement has been updated and addresses interdepartmental training issues [See Attachment 4.9 (c)].

MRS has a current statewide strategic initiative of providing quality transition services. In response to this statewide business direction, training programs are development which include the participation of the transition coordinators, intermediate school district staff, personnel from the assistive technology centers and MRS. Also, staff from these various partners have been included as participants in the new counselor training academy series.

Special education has also funded the Transition Services Project, which is a collaborative effort to address training needs of school and rehabilitation personnel. Two rehabilitation staff assists with this project; one as a liaison between the two agencies and the other staff is in a coordinator role with that position being funded by the project.

Summary of the Linkage of the Various Components of CSPD with the In-service Training Grant

In conclusion, there are four ways that the CSPD plan and the agency's in-service training grant are linked. These five linkages are:

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First, the staff responsible for managing and planning both of these functions are housed in the same unit and receive administrative support activities from the same support staff.

Second, the CSPD funds are the primary funds for assuring that all case carrying staff (counselors and supervisors) are "qualified" to be performing as rehabilitation counselors. However, the in-service grant funds will be made available to supplement the CSPD grant funds if needed.

Third, both the CSPD project and in-service training program utilize the same evaluation forms to determine the effectiveness of various seminars and courses where staff has participated. However, the CSPD project evaluation plan has many additional evaluation phases at the heart of both the CSPD project and in-service training activities in a shared database on program effectiveness.

Fourth, both the CSPD project and in-service training program utilize the same resources to assure that all participating staff receive needed information in their native language or preferred modes of communication. For example, access to a printer that produces Brailled materials, a TTY, and needed qualified interpreters are all shared resources between both projects.

Please Note: This attachment has been reviewed by the Michigan Rehabilitation Council. Input and suggestions were also sought from the Council.

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**Attachment 4.12:** Assessments; Annual Estimates; Goals and  
Priorities; Strategies; and Reports of Progress

**Att. 4.12(a):** Results of Comprehensive Statewide Assessments of  
the Rehabilitation needs of Individuals with  
Disabilities and Need to Establish, Develop, or  
Improve Community Rehabilitation Programs.

The agency, in collaboration with the Michigan Rehabilitation Council, is conducting a comprehensive, statewide assessment of the needs of persons with disabilities, including the needs of individuals with disabilities who may be served by the Michigan Works! system. This process has involved several phases: (1) determination of the most appropriate method by which to survey persons with disabilities, (2) identification of an appropriate and comprehensive survey instrument, and (3) survey of persons with disabilities by various demographic variables (e.g., race, gender, age, county, primary disability, severity of disability, etc.). Criteria have been set forth to assure that specific and adequate information is collected that addresses (1) the prevalence rates of significant population characteristics; (2) the needs of individuals with the most significant disabilities, especially their need for supported employment; (3) the needs of individuals disabilities who are minorities; (4) individuals who have been un-served and under-served by the vocational rehabilitation program, as well as accountability of the state workforce investment system; and (5) the accessibility of rehabilitation programs. The results from the needs assessment will help the agency and it's community partners to improve and/or develop needed community rehabilitation and employment programs and services.

The agency has implemented a variety of methods by which to obtain information pertaining to the needs of disabled individuals in the state. Town Hall meetings have been held at various locations throughout the state to obtain feedback about the needs of individuals with disabilities in the local communities, and ongoing analysis of the effectiveness of the rehabilitation program is occurring on an annual basis through the (1) administration of a customer satisfaction survey, (2) follow-up survey to employed customers two-years post-closure, and (3) provision and analysis of data related to the five agency strategic initiatives. Seven focus groups for individuals with disabilities served by Michigan Works! have been held to better understand barriers to effective services and to improve access to Michigan Works!services.

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**Att. 4.12(b): Annual Estimates of Individuals to be Served and  
Costs of Services.**

- 1) Approximately two million people could apply for services in the state of Michigan. This figure was derived using 1999 Michigan population projections and multiplying by a disability prevalence rate. The disability prevalence rate multiplier was derived by taking the average of the percent disabled identified in the 1987 agency needs assessment and the percent of potentially disabled individuals identified from the 1999 census projections and 2000 census data. All figures use a minimum age of 16 for inclusion in the estimation.
- 2) Approximately 44,150 individuals applied for services with Michigan Rehabilitation Services during the 2001 fiscal year with 2,423 persons being provided supported employment services, 1,000 of whom received services funded under Title VI, Part B. It is estimated that we serve approximately **3.2** percent additional individuals per year in Title I for the time period covered by this plan.
- 3) The cost of services for the estimated number of individuals that could apply for services (excluding program administration costs) is predicted to be 1.7 billion dollars. This figure was determined using the estimated number of people that could apply for services (see section 4.12b.1) multiplied by the average case cost for those individuals ending the rehabilitation process during the 2000 fiscal year.

**Att.4.12(c):** State's Goals and Priorities, Including Options Related to the Order of Selection, and Goals and Plans for Distribution of Title VI, Part B Funds.

Michigan's Title VI, Part B allocation of \$1,100,000 in case service funds in FY 2002 is expected to provide services to less than forty percent of the agency's cases in supported employment. The balance of caseload funds comes from general caseload funds. Demand for supported employment in Michigan continues to exceed Title VI-B resources. The anticipated Title VI, Part B allocation of approximately \$1,100,000 is expected for FY 2003.

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MRS plans to serve 1100-1200 persons with significant disabilities utilizing Title VI-B funds in FY 2003. Additional supported employment customers will be served using 110 funds. The entire Title VI-B award for FY 2003 will be distributed to district offices in the form of case service funds. The funds will be used primarily to purchase job coaching and transitional employment related service from private, non-profit community rehabilitation programs and psychosocial programs.

The size of Title VI-B awards to individual MDCCD-RS district offices varies depending upon the size of the local program and the unique characteristics of the community. The size of a local supported employment program is largely dependent upon consumer demand for the service, as well as the community's ability to fund the long-term supports necessary to maintain consumers in supported employment. It is anticipated that all MDCCD-RS district offices in FY 2003 will offer supported employment services as a result of either Title VI-B funds, generic basic program funds, and/or expanded cash match agreements with the local community mental health agency.

Local agreements are required for MDCCD-RS district offices providing supported employment services. Interagency agreements include the following information: 1) roles and responsibilities of respective community agencies including MDCCD-RS and the entity providing extended supported services; 2) the number of persons to be placed in employment during the period of time covered by the interagency agreement; and 3) an assurance that extended support services will be provided following MDCCD-RS case closure. The MDCCD-RS Casework manual contains a policy generally limiting utilization of Title VI-B funds to 18 months for a given client, unless under special circumstances.

MDCCD-RS maintains supported employment programs as a priority to ensure availability of the service to all consumers, especially those with the most significant disabilities, who could benefit from it.

MDCCD-RS has entered into collaborative relationships with the Michigan Department of Community Health and local community mental health boards to establish flexible service agreements. These cash-match agreements support both the traditional supported employment services for persons with developmental disabilities and psychosocial programs for the chronically mentally ill.

**Att.4.12(d):** State Strategies and Use of Title I Funds for  
Innovation and Expansion Activities

Identification of the needs of persons with disabilities, as identified in public meetings and focus groups, input from consumer organizations, the Michigan Rehabilitation Council (MRC), the Statewide Independent Living Council, Client Assistance Program, Tech 2000 federal assistive technology grant, and key stakeholders in the community have served as the basis for the development of agency strategic priorities. The Comprehensive Assessment of Needs (as described in 4.12(a)) is underway and will be completed in 2002. Annual strategic planning meetings attended by Senior Managers and MRC members validate the consumer issues and concerns emerging with the changing social structure as well as continuing as the result of lack of change in social systems impacting persons with disabilities, especially those with the most significant disabilities in the state. Strategic planning and the annual prioritization of agency goals and expectations is conducted in full partnership with the Michigan Rehabilitation Council and our other consumer partners. Strategic Planning with consumer representatives and our community partners helps us develop strategies to improve the performance of the state agency in assisting persons with disabilities overcome barriers to equitable access to and participation in the Title I employment program, Title VI Part B supported employment program, and integration into communities. The building of strong relationships with key individuals and organizations in the disability community have raised agency planning to an open, consumer-focused process. Strategic planning has addressed the barriers to equal access and full participation of all individuals with disabilities in the state supported vocational rehabilitation program by implementing the following:

- Outreach to minority populations especially those with the most significant disabilities. Local business plans have provided an assessment of minority populations in the various districts of the state, identified specific minority groups, identified allies in the community to help address the needs of these populations, and have developed local strategies for inclusion of greater numbers of members of these groups as customers, vendors, and as rehabilitation staff. Professional organizations, which address the professional development and hiring of rehabilitation staff, are supported and involved in personnel recruitment and hiring. Staff representing the



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various minority groups have developed liaisons with minority community leaders, participate in community activities, and are able to address customers in their own language. The agency has initiated a Minority Issues Committee to address equitable access to and services by the vocational rehabilitation program. The committee is developing a database, by district office, of prevalence of the minority groups receiving services in relation to the prevalence of the minority group in the general population. The committee will also address a comparison of the services received by individuals from the minority groups in comparison with the services received by non-minority customers. The study will focus on minority group members with significant disabilities and those with the most significant disabilities. Results of the study will direct outreach strategies and service equity improvements.

- Integration of assistive technology initiatives into each stage of the vocational rehabilitation system. Stronger collaborative relationships with the TECH 2000 project, has resulted in statewide training for rehabilitation staff that interact with customers as counselors, rehabilitation aides, or contract staff. Transition Coordinators, who are our partners in the schools, were also invited to participate to encourage a team approach to the provision of AT within the school and rehabilitation systems. Local Community Assistive Technology Project representatives were included to develop stronger vocational rehabilitation linkages to community resources for AT and to foster support of VR staff for the local AT initiatives. This strategy will continue throughout the remainder of the project to build a sustainable AT resource in communities. Local projects within district offices have also supported local projects such as annual AT Expo's and training for customers and employers in the availability of AT equipment and services, and the agency as a resource to consumers, employers, and community partners.
- Partnerships have been developed with the MARO Employment and Training Association, the Statewide Independent Living Council, the Michigan Association of Centers for Independent Living, and with other private for profit and private non-profit organizations to involve them more fully in the delivery of vocational rehabilitation services at the state and local levels. Through the expansion, development, or improvement of community rehabilitation

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programs, our partners will assist the state agency in achieving the goals and priorities of the state vocational rehabilitation program. Forty-four (44 ) grants were issued to twenty-seven community rehabilitation organizations for a total of \$1.6 million during FY 2002 to expand and improve community rehabilitation programs. In addition, local agreements and grants with organizations not meeting the community rehabilitation organization criteria were awarded to broaden the availability of services to persons with disabilities, especially those with the most significant disabilities. Grant goals included development of transition services, business services, community-based employment services, substance abuse services, and other projects as defined by agency priorities and local business plan priorities.

- Expand the role of community rehabilitation programs in the one-stop workforce investment centers. Partnerships at the state and local levels support the inclusion of community rehabilitation programs as part of the one-stop service delivery centers. Developing relationships as part of the workforce boards and linking the community rehabilitation organizations, as qualified service providers will expand the availability of vocational rehabilitation services in the local service delivery areas. Providing leadership to the workforce development boards in designing service delivery to include persons with disabilities, especially those with the most significant disabilities, is the goal of the department and the agency and has become a priority for the implementation during the next few years. Nine grants to community rehabilitation providers, totaling \$433,000, are currently targeted toward assisting integration of services for persons with disabilities with those of the statewide workforce investment system.
- Improvements in programmatic and physical accessibility for persons with disabilities in the one-stop system are also occurring in several collaborative activities with the Michigan Works! association. These include the collaborative work being done through a \$900,000 USDOL accessibility grant and a USDE-funded grant to provide technical assistance to the statewide Michigan Works! system to enhance access and employment outcomes for people with disabilities into this universal one-stop system. MRS is deeply involved in these activities which include consumer and one-stop agency needs assessment, disability

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awareness and de-mystification for staff, removal of artificial and real barriers, improving knowledge of resources and systems related to persons with disabilities, assistive technology, and basic accommodations.

- Improvement of the performance of the State in regard to performance indicators and evaluation standards. MRC representatives participated on the RSA focus groups for State Rehabilitation Councils in December 1998 to obtain input on evaluation standards and performance indicators.

For FY 2003, \$1,220,000 of Title I funds have been allocated to support Innovation and Expansion grant projects throughout Michigan. The priority for I&E grants is "innovations that enhance the efficiency and effectiveness of vocational rehabilitation service delivery." Potential for sustaining and for replicating the innovations will be critical factors in selecting applications for funding.

Roughly 54 percent of the FY 2003 I&E funds (\$663,172) has been set aside to continue FY 2002 projects that (a) have demonstrated positive results, (b) have proven "value added," and (c) have potential for being sustained and replicated. See subsection (e), below, for an overview of I&E projects being considered for continuation in FY 2003 .

The balance of FY 2003 funds (\$556,828) will be competitively awarded in August 2002 to new I&E projects. It is expected that sixteen innovative projects will be funded, with an average grant award of \$35,000. In addressing the MDCCD-RS priority for FY 2003, the projects will stress innovations related to youth services, business services, services to Social Security recipients, minority populations, and integration with Michigan Works! service centers.

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**Att. 4.12(e)**: Evaluation and Report of Progress in Achieving  
Identified Goals and Priorities and Use of Title I  
Funds for Innovation and Expansion Activities

Reports of progress and success in the achievement of evaluation standards and performance indicators and the agency's strategic goals and priorities under Title I were made to the Michigan Department of Career Development and the Michigan Rehabilitation Council in November 2001 and February 2002. MRS and the Michigan Rehabilitation Council have not yet submitted a joint report to the Commissioner regarding the development and review of annual goals and priorities under Title I, but plan to do so at the end of this fiscal year.

Innovation and Expansion (I&E) grants are awarded for projects that develop or expand innovative approaches to serving persons with disabilities, especially those with the most significant disabilities. I&E grant programs support the agency's Strategic Business Directions and District Business Plans. They reflect a commitment to research, development, and systems change. They also emphasize community and statewide partnerships.

FOR FY 2002, Michigan Rehabilitation Services awarded 29 I&E grants to 21 local and statewide organizations, totaling \$1.22 million. The priority for I&E grants was the same as that stated above for FY 2001. Eight of these projects, totaling \$272,527 (22 percent), were directed toward outreach to persons with disabilities who are minorities, or have been traditionally unserved or underserved with the outcome of overcoming barriers to equitable access to vocational rehabilitation services and supported employment programs. Of these projects, four (4) focus on ethnic minority groups, including Latin Americans and African Americans. The remaining four projects are aimed at persons who have been unserved/underserved, including substance abusers, deaf or hard of hearing, HIV/AIDS patients, and people with severe and persistent psychiatric disorders.

Nine FY 2002 I&E projects are helping students to make the transition from school to work. Three projects are supporting community-based employment services and six are providing business services. Two projects are focusing an integration with Michigan Works! The remaining project is addressing the special needs of Social Security recipients.

Evaluation of the I & E grant projects for FY 2000 indicates for the most part that the projects are achieving or surpassing stated goals and priorities. The FY 2001 grant evaluation is

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currently underway. Preliminary findings indicate the majority of these have also achieved stated goals and priorities. If goals and priorities were not achieved, grantees and their district offices have the option of discontinuing the project, re-planning with partner agencies to modify the strategies based on knowledge and data gathered to date, or modifying the project to provide more realistic outcomes for the target population or for the community.

**Attachment 4.16(b)(2):**     Mediation and Impartial Due Process  
Hearing Procedures Policy

Applicants and eligible individuals or, if appropriate, an individual's representative shall have the right to appeal any determination made by MRS personnel with which they are dissatisfied, that affects the provision of vocational rehabilitation services, within 30 days of the decision by requesting a hearing before an impartial hearing officer and, also, shall have the right to pursue mediation whenever a hearing is requested. The hearing shall be held within 60 days of receipt of the request unless both parties agree to extend the time. The mediation process is voluntary, does not diminish the timeliness standard for hearings and must be conducted by qualified mediators who are impartial and trained in effective mediation techniques. Services initiated in evaluation and assessment, IPE development or as part of an IPE shall not be suspended, reduced, or terminated pending a resolution through mediation, pending a decision by a hearing officer, or pending informal resolution unless the applicant or eligible individual or their representative so requests or there is evidence that the services have been obtained through misrepresentation, fraud, collusion, or criminal conduct on the part of the applicant or eligible individual. Nothing shall preclude the parties to such a dispute from informal negotiation and resolution prior to mediation and/or hearing if the informal process is not used to deny or delay the right of an applicant or eligible individual to a hearing or to deny any other right outlined in agency policy.

Guidelines

Applicants and eligible individuals or, as appropriate, their representatives are notified of the right to appeal agency decisions by requesting a hearing before an impartial hearing officer, pursue mediation, and obtain assistance from the Client Assistance Program. This notification is provided in writing at the time of intake, IPE development and at the time of reduction, suspension, or cessation of services.

Upon notification by the hearings manager of a request for a hearing, the district manager initiates action to determine if the issue can be resolved informally or, if both parties agree, to request a specific extension of time. The hearing manager acknowledges receipt of the hearing request, in writing, to the applicant or eligible individual indicating the intent to pursue

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informal resolution and provide the opportunity for mediation. On a random basis the hearing manager assigns a qualified impartial hearing officer and schedules the hearing unless notified by the district manager within two weeks that the issue has been resolved and this is confirmed by the applicant or eligible individual. A written summary of the resolution agreement should be sent to the applicant or individual by the district manager with a copy to the hearings manager and to the applicant's or individual's representative, if the applicant or individual was represented.

Applicants or eligible individuals have the opportunity to submit evidence or information and present witnesses to support his or her position at a mediation session or hearing and are allowed to be represented in the mediation session or hearing by a person selected by the applicant or eligible individual.

Upon receipt of a request for mediation, the hearings manager, on a random basis, assigns a qualified mediator and schedules the mediation in a timely manner and at a location convenient to the parties to the dispute. The agency bears the cost of the mediation process, including any reasonable accommodations needed by the applicant or eligible individual to participate in the mediation process. Although mediation is voluntary, district managers and counselors are strongly encouraged to participate in the process. The hearings manager in conjunction with the district manager is responsible for arranging any accommodations necessary to facilitate the claimant's participation in mediation. The agency is not responsible for any costs associated with the applicant's or eligible individual's representation at the mediation session or with any costs associated with the appearance of witnesses presented by the claimant.

Discussions that occur during the mediation process are confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding. At any point during the mediation process, either party or the mediator may elect to terminate the mediation. In the event mediation is terminated, either party may pursue resolution through an impartial hearing.

An agreement reached by the parties to the dispute in the mediation process must be described in a written mediation agreement that is developed by the parties with the assistance of the qualified and impartial mediator and signed by both parties. Copies of the agreement must be provided to both parties with a copy to the hearings manager. The written

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agreement may be in the form of an Individual Plan for Employment, a plan amendment, or a set of agreements on how to move forward. Either party may enter the written agreement, reached by the parties during the mediation process, as evidence in a subsequent due process hearing or civil proceeding.

District managers serve as agency representatives in hearings unless a manager made the decision being appealed and will be serving instead as a witness. Another district manager or deputy division director may be assigned by the division director in these situations.

The district manager should ensure that an interpreter, reader, transportation assistance, or other accommodations are provided, if necessary, for an applicant or eligible individual to participate in the hearing process. The applicant or individual has the opportunity to present additional evidence or witnesses and to examine all witnesses and/or materials or sources of information and evidence. The applicant or individual or the individual's representative can review or receive copies of pertinent case file information in preparation for a hearing, subject to agency policy for release of confidential client information. Copies of relevant agency policies and guidelines can also be provided if requested. These materials should be provided at no cost to the applicant or individual or the individual's representative. The agency representative is responsible for selecting agency witnesses, including the applicant's or eligible individual's counselor, and selecting and making copies of the written evidence (exhibits) needed to support the agency's decision. The applicant or individual or the individual's representative is responsible for selecting claimant witnesses, paying for any costs related to the witness, and selecting and making copies of written evidence that will be provided in support of the applicant's or individual's case.

Notification of Hearing is issued by the hearings manager to the applicant or eligible individual and agency representative at least two weeks prior to the hearing, specifying the date, time, location, name of the hearing officer, and the issue(s) being appealed. An outline of the hearing procedure and guide on how to prepare for the hearing is enclosed. The hearing officer may determine that an abandonment of the hearing has occurred and dismiss the case if either an applicant or individual or an authorized representative fails to notify the agency that the applicant or individual will be unable to attend at the scheduled time or does not appear at the hearing. The state



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agency will exercise flexibility in adhering to timeframes if claimant notification is a few days late for good cause.

Hearing officers make their decisions within 15 working days of receipt of the hearing transcript, but no later than 30 calendar days from the date of the hearing. The impartial hearing officer must make a decision based on the provisions of the approved state plan, the act, federal vocational rehabilitation regulations and policies that are consistent with federal requirements. A full written report of the findings and grounds for the decision is provided to the agency director, claimant, claimant's representative if the claimant was represented, and the agency representative. The decision of the impartial hearing officer is the final administrative remedy.

Any agency action required as a result of a final hearing decision should be taken promptly. Either party involved in the hearing may bring a civil action. If a party brings a civil action to challenge the final decision of a hearing officer, the final decision of the hearing officer must be implemented pending review by the court.

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**Attachment 7.3:** Quality, Scope, and Extent of Supported  
Employment Services

In 2001, a total of 36,615 persons with significant disabilities have been served. Of this number, 2,423 persons received supported employment services. This includes people in both the intensive and extended phases of supported employment. Of the cases that received supported employment services, 1,000 were Title VI-B funded, a decrease of 364 since 1999 representing increased costs. The average hourly wage of supported employment closures was \$5.80, an increase from the 1999 average wage of \$5.16. The average number of hours worked was 22.2 hours. Title VI-B funds continue to be fully expended and represent 32% of all funds expended on supported employment. Persons with mental retardation continue to comprise the largest group served, followed by people with mental illness.

Local programs continue to offer a variety of supported employment services to persons with the most significant disabilities. Persons with disabilities are served primarily by the schools and community mental health systems. Agreements with these partners form the basis of most supported employment programs. Services through these agreements include, but are not limited to individual placement, psychosocial rehabilitation via clubhouse programs, job coaching, job referral, job development, job placement, and long term follow along. Some programs include enclaves and short-term trial work experiences to assist the consumer in making an informed choice in selecting a vocational goal. Collaborating with a local mental health agency, state agency field offices participate in team meetings with the consumer where person-centered planning is used as a job readiness component toward selecting a vocational objective and identifying services needed to assist the individual in reaching his/her goal.

The state agency and the state Department of Community Health-Mental Health Division work together to organize, plan, deliver, and fund supported employment as one method to strengthen vocational program options for persons with significant disabilities, providing persons with disabilities the opportunity to achieve desirable vocational outcomes. The two agencies collaborated in the development of Guidelines for Supported Employment document, which provides an avenue for local partners to use to develop and implement vocational opportunities for mutual customers. These guidelines identify federal standards for supported employment programs sponsored by

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MRS, and procedures for coordination of services, especially transition to extended support services after MRS services are provided and for the duration of the placement. The interagency agreement describes the transition from MRS services to extended services to occur when the worker has stabilized in employment (job coaching is utilized 25% or less time for the worker on the job), and the worker has substantially met the goal for the number of hours of employment in the IPE.

The state agency field offices will continue to implement transitional employment policies emphasizing local partnership agreements with community mental health and school programs.

The vocational rehabilitation counselors associated with local career preparation/transition services programs, have acknowledged the need for schools, parents, and community partners, including community mental health programs, to focus on providing vocational planning earlier in the education process. Schools need to be aware of supported employment issues. Parents lack understanding of systems, particularly the diminished supports available after a child reaches the age of majority.

There is recognition that different strategies and support services are needed for this population. Youth require longer job coach utilization. Parents request more training in the IEP and transition plan development and look to the schools to provide this. In 2003, the state agency, Department of Education, Special Education and Early Intervention Services, and the Department of Community Health, Mental Health and Substance Abuse Services Division, will continue their collaboration efforts to forge a partnership at the state level to address these issues as a necessary component of supported employment service delivery.

The Department of Community Health is engaged in a revision of the funding structure that may substantially change the availability and structure of funding for CMH provided services. Continuing collaboration at the field and state level is intended to minimize significant impact to populations that are receiving supported employment services.

There has been an increase in community agreements and grants for transitional services planning for youth with disabilities preparing to exit schools and enter the work force. These agreements and grants included a strong emphasis on service delivery and community supports by way of tri-party or three way

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agreements with the community mental health agency, the state agency, and the intermediate school district for job coaching and other support services.

The MARO Employment and Training Association, in collaboration with the Michigan Rehabilitation Association (MRA), annually sponsor a statewide Michigan Rehabilitation Conference. The conference continues to include several workshops on supported employment issues and transition to employment of youth with disabilities as it relates to supported employment programming strategies and best practices.